



APPLICATION FOR RESIDENTIAL ELIGIBILITY

For more information see www.cifstate.org



USE FOR DISCIPLINARY TRANSFERS FROM A-B-A WHO PLAYED NO SPORTS AT B AND LEFT A UNDER CONDITIONS AS SET FOR IN 210 C (2)

FORM 207/201C.2/510

Please complete all fields - incomplete applications will be denied

1. STUDENT'S NAME _____ **DATE OF BIRTH** ___/___/___ **Circle one:** 9 10 11 12
(Grade Level @ time of enrollment in new school)

2. CURRENT ADDRESS _____ **PHONE** (_____) _____
(city) (zip) (area code)

3. FORMER ADDRESS _____
(city) (zip)

4. TRANSFER FROM _____ **HIGH SCHOOL TO** _____ **HIGH SCHOOL**
(previous school name) (new school name)

5. ENROLLED IN PREVIOUS SCHOOL (B) FROM ___/___/20___ **TO** ___/___/20___ **RETURNED TO SCHOOL A on:** ___/___/20___
(high school enrollment ONLY) (month/day/year) (month/day/year) (month/day/year)

6. LIST IN ORDER ANY OTHER HIGH SCHOOLS ATTENDED:

	Previous School(s)	Enrollment Dates
1.	_____	Attended From: _____ To: _____
2.	_____	Attended From: _____ To: _____
3.	_____	Attended From: _____ To: _____

7. APPLICATION MADE UNDER THE FOLLOWING:

APPLICATION FOR TRANSFER HARDSHIP VARSITY ELIGIBILITY EXCEPTION BYLAW 208— Under 210.C.2 (A-B-A)-attach behavioral contract agreement with School A made prior to transfer to School B

STUDENT DID NOT PLAY ANY SPORTS WHILE ENROLLED IN PREVIOUS SCHOOL (SCHOOL B)

8. Place a CHECK MARK in front of each sport in which this student competed in a high school contest AT ANY LEVEL (Freshman or JV or Fr/Soph or Varsity) @ SCHOOL A during the 12 months before this transfer BACK TO SCHOOL A:

This includes all scrimmages, practice games, pre-season games, league games, playoff games etc! ANY contest of ANY kind in which this student played at school A in the 12 months BEFORE the date in #5 above "Returned to School A on:

<input type="checkbox"/> BADMINTON	<input type="checkbox"/> BASEBALL	<input type="checkbox"/> BASKETBALL	<input type="checkbox"/> CROSS COUNTRY	<input type="checkbox"/> FIELD HOCKEY	<input type="checkbox"/> FOOTBALL
<input type="checkbox"/> GOLF	<input type="checkbox"/> GYMNASTICS	<input type="checkbox"/> LACROSSE	<input type="checkbox"/> SKIING	<input type="checkbox"/> SOCCER	<input type="checkbox"/> SOFTBALL
<input type="checkbox"/> SWIMMING	<input type="checkbox"/> TENNIS	<input type="checkbox"/> TRACK	<input type="checkbox"/> VOLLEYBALL	<input type="checkbox"/> WATER POLO	<input type="checkbox"/> WRESTLING

I DID NOT PLAY SPORTS AT ANY LEVEL @ SCHOOL "A" IN THE 12 MONTHS BEFORE I RETURNED TO SCHOOL A

9. SCHOOL A ATHLETIC DIRECTOR'S SIGNATURE CONFIRMING SPORTS PARTICIPATION AS INDICATED ABOVE: School "A" AD Signature Required!

10. FORMER SCHOOL(SCHOOL B)-please initial all that apply and sign below (see also page 2):

YES	NO	YES	NO
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student is transferring with NO disciplinary action pending or which has been taken at the time of transfer from our school.		Student met all other CIF and/or school Eligibility Rules at the time of transfer to the best of my knowledge.	
<input type="checkbox"/>	<input type="checkbox"/>	STUDENT'S GPA IN THE LAST GRADING PERIOD AT THE PREVIOUS SCHOOL _____ . _____ GPA	
Student was ACADEMICALLY eligible at our school at the time of transfer			
Former School (School B) Principal's Signature _____		Date: _____	
Print Principal's Name _____			

11. CERTIFICATION OF APPLICATION: By filing this application for interscholastic athletic eligibility, I specifically authorize any and all of this student's former and current/new high schools to release all records regarding this student and to disclose to the CIF Section ("CIF") representative any information or documentation needed or requested by the "CIF" in making this eligibility determination. I authorize the "CIF" to use that information in making its decision. I understand that the "CIF" may be unable to grant athletic eligibility absent the disclosure of relevant information or documentation from this student's former or current/new high schools. I am authorized to make this request. I affirm that all of the above statements are true to the best of my knowledge. I further affirm that I understand that if subsequent to the approval of this application, it is discovered that this approval was granted under false, erroneous, inaccurate or incomplete information, severe penalties affecting the future eligibility of this student-athlete may result. (CIF By-law 200)

SIGNATURE OF PARENT/GUARDIAN _____ **DATE** _____ **SIGNATURE OF STUDENT** _____ **DATE** _____

510 PRE-ENROLLMENT CONTACT AFFIDAVIT (By-law 510)

PARENT AND STUDENT STATEMENTS **Read #1, #2 and #3 carefully before signing.**

1 SIGN IF TRUE: By signing this affidavit below, I certify that no person who is associated* with the athletic department of the enrolling (new) school (School "A"), or is part of the booster club of School "A" or who was acting on their behalf has had ANY communication, directly or indirectly, through intermediaries or otherwise with this transfer student, student's parents, legal guardian or caregiver, or anyone acting on behalf of this student, during the time this student was enrolled in School "B" & prior to their return to School "A". (*Associated is defined in CIF Bylaw 510)

Parent's Signature	Date	Student's Signature	Date
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2 SIGN IF TRUE: By signing this affidavit below, I certify that the student has not participated during the previous 24 months on any non-school athletic team* (i.e., AAU, American Legion, club team, etc.) that is associated* with or coached by anyone associated* with the enrolling (new) school (School "A"). (*See Bylaw 510 for definition of a non-school athletic team)(*Associated is defined in CIF Bylaw 510)

Parent's Signature	Date	Student's Signature	Date
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Sign #3 below if you could not sign that BOTH #1 and #2 above were true.

3 SIGN IF EITHER #1 OR #2 ABOVE ARE NOT TRUE: I am unable to certify that one or both of the above statements are true. Therefore, as required, I am submitting a complete written disclosure of the specifics. (Attach the explanation to this form.)

Parent's Signature	Date	Student's Signature	Date
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510-FORMER AND CURRENT(NEW) SCHOOL STATEMENTS

1. My signature below attests that to the best of my knowledge I have no credible** evidence of any person who is associated* with the athletic department of the new school (School "A") or who is part of the booster club of the new school (School "A") or who is acting on their behalf, having communication, directly or indirectly, through intermediaries or otherwise with the transfer student, student's parents, legal guardian or caregiver, or anyone acting on behalf of the student, during the time this student was enrolled in School "B" & prior to their return to School "A".
2. **AND** Furthermore, I am not aware of this student participating during the previous 24 months on any non-school athletic team* that is associated* with the enrolling (new) school (School "A"). (*See Bylaw 510 for definition of a non-school athletic team and the term "associated")

IF THESE STATEMENTS ARE BOTH TRUE, AD, Principals and Coach(es), SIGN IN BOX 1;

IF NOT, then Principal only should sign Box 2 & attach statement(s) describing what makes 1 or 2 untrue.

<p style="text-align: center; color: blue;"><u>FORMER School Signatures</u></p> <p style="font-size: 2em; opacity: 0.5; transform: rotate(-15deg); position: absolute; top: 50px; left: 50px;">Only Principal's signature is required since the student did not play sports at School B</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Signature of Head Coach (fall)</td> <td style="width:20%; text-align: center;">Sport</td> <td style="width:20%; text-align: center;">Date</td> </tr> <tr> <td>Signature of Head Coach (winter)</td> <td style="text-align: center;">Sport</td> <td style="text-align: center;">Date</td> </tr> <tr> <td>Signature of Head Coach (spring)</td> <td style="text-align: center;">Sport</td> <td style="text-align: center;">Date</td> </tr> <tr> <td>Signature of Principal of former school</td> <td></td> <td style="text-align: center;">Date</td> </tr> </table>	Signature of Head Coach (fall)	Sport	Date	Signature of Head Coach (winter)	Sport	Date	Signature of Head Coach (spring)	Sport	Date	Signature of Principal of former school		Date	<p style="text-align: center; color: blue;"><u>CURRENT/NEW School Signatures</u></p> <p style="text-align: center;">AD, Principal & any coach for which this student wishes to play should sign</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Signature of Athletic Director of new school</td> <td style="width:20%;"></td> <td style="width:20%; text-align: center;">Date</td> </tr> <tr> <td>Signature of Head Coach (fall)</td> <td style="text-align: center;">sport</td> <td style="text-align: center;">Date</td> </tr> <tr> <td>Signature of Head Coach (winter)</td> <td style="text-align: center;">Sport</td> <td style="text-align: center;">Date</td> </tr> <tr> <td>Signature of Head Coach (spring)</td> <td style="text-align: center;">Sport</td> <td style="text-align: center;">Date</td> </tr> <tr> <td>Signature of Principal of new school</td> <td></td> <td style="text-align: center;">Date</td> </tr> </table>	Signature of Athletic Director of new school		Date	Signature of Head Coach (fall)	sport	Date	Signature of Head Coach (winter)	Sport	Date	Signature of Head Coach (spring)	Sport	Date	Signature of Principal of new school		Date
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BOX 2 I am unable to certify that one or both of the above statements are true. Therefore, as required, I am submitting a complete written disclosure of the specifics. **(Attach the explanation to this form-CHECK BELOW AND SIGN.)**

<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%; border-bottom: 1px solid black;">Signature of FORMER Principal unable to certify statements above are both true.</td> <td style="width:20%; text-align: center; border-bottom: 1px solid black;">Date</td> </tr> </table>	Signature of FORMER Principal unable to certify statements above are both true.	Date	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%; border-bottom: 1px solid black;">Signature of CURRENT Principal unable to certify statements above are both true.</td> <td style="width:20%; text-align: center; border-bottom: 1px solid black;">Date</td> </tr> </table>	Signature of CURRENT Principal unable to certify statements above are both true.	Date
Signature of FORMER Principal unable to certify statements above are both true.	Date				
Signature of CURRENT Principal unable to certify statements above are both true.	Date				

**NEW SCHOOL ONLY should mail completed, original to CCS, 6830 Via Del Oro, Suite 103, San Jose CA 95119
OR scan and e-mail application and all documents to Michael Mancuso**

NOTE: SUBMIT THE ORIGINAL DOCUMENT. ALLOW 20 BUSINESS DAYS FOR INVESTIGATION AND REVIEW. AT THE TIME OF FILING THIS DOCUMENT, SUBMIT ALL KNOWN FACTS AND/OR DOCUMENTS. ADDITIONAL FACTS SUBMITTED LATE MAY NOT BE CONSIDERED BY THE COMMISSIONER.