



TRANSFER CONTACT INFORMATION

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This form must be filled out by the parents and student-athlete any time a transfer is made. This form must accompany all hardship waivers submitted to the CHSAA office. Submit all other Transfer Contact Information forms to CHSAA with your eligibility lists. This form must be on file with the school before participation unless #1, 2, 3, 4, shows a violation.

STUDENT'S NAME _____

PARENT'S NAME _____

PREVIOUS SCHOOL _____

DATE ENROLLED AT CURRENT SCHOOL _____

SCHOOL TO WHICH YOU ARE TRANSFERRING _____

REASON FOR TRANSFER _____

SPORT PARTICIPATION DURING THE 12 MONTHS PRIOR TO TRANSFER

FALL _____ WINTER _____ SPRING _____

SCHOOL TO WHICH YOU ARE TRANSFERRING YOUR ELIGIBILITY _____

FALL _____ WINTER _____ SPRING _____

CONTACT YOU HAVE HAD WITH THE NEW SCHOOL PRIOR TO THE TRANSFER

List any coaches at the new school with whom you spoke prior to enrollment:

List any other persons at the new school with whom you had contact prior to enrollment (Principal, Athletic Director, Parent Group, Booster, etc.)

Did anyone contact you about attending or playing for the new school prior to enrollment?

Yes No If Yes Explain:

My non-school team coach is a member of the new school coaching staff (in any sport/ at any level.

Yes No If Yes Explain:

RECEIVING SCHOOL ATHLETIC DIRECTOR

As the Athletic Director of _____ High School, I verify to the best of my knowledge that no athletic recruiting effort has been made by any staff or school representatives to persuade this student-athlete to register at our school.

ATHLETIC DIRECTOR/PRINCIPAL: _____

(SIGNATURE REQUIRED)

I verify that the information on this form is correct under potential penalty of ineligibility and restriction from state playoff competition for the athlete and/or team.

Student: _____

(SIGNATURE REQUIRED)

Parent: _____

(SIGNATURE REQUIRED)



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PREVIOUS SCHOOL ATHLETIC DIRECTOR

As the Athletic Director of _____ High School, I verify to the best of my knowledge that there has been no athletic recruiting effort by the receiving school or athletic reasons to persuade this student-athlete to transfer to the receiving school.

If you feel that athletics have motivated this transfer please explain below:

ATHLETIC DIRECTOR/PRINCIPAL: _____ (SIGNATURE REQUIRED)