



ALL FOREIGN STUDENT-ATHLETES MUST COMPLETE THIS FORM ONLINE. NO PAPER COPIES WILL BE ACCEPTED! SCHOOLS WILL UPLOAD THIS SIGNED DOCUMENT TO THE CASE FILE IN CIFCS HOME.

1) Student Name _____ M F _____
Date of Birth _____ Grade _____ Area Code/Home Phone _____

2) Host Family First Name _____ Host Family Last Name _____

3) Host Current Address: _____
House Number and Street Name _____ City/State/Zip _____

PUBLIC SCHOOL DISTRICT YOUR CURRENT ADDRESS IS IN

SPECIFIC PUBLIC H.S. YOUR CURRENT ADDRESS BELONGS TO

Date entire family unit occupied current address: _____

4) Enrollment Date _____ Name of Approved Foreign Exchange Program _____

I have looked at the state website to confirm this is an approved program Yes _____ No _____

Local Representative Name: _____ Phone # _____

Former Address _____
House Number and Street Name _____ City/State/Zip _____

5) Has the Student attended your school prior to this transfer? Yes _____ No _____

6) **CERTIFICATION OF APPLICATION:** I authorize any former school/s and the current school to release all records/requests made by the CIF and to discuss enrollment and/or extra curricular participation with the CIF. I authorize the CIF to use that information in making its determination. I am authorized to execute 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 athletic eligibility application, it is discovered that this approval was granted on false, erroneous, inaccurate or incomplete information, severe penalties affecting the future eligibility of this student-athlete may result.

By signing this affidavit, I certify that no person/s connected with the athletic department of the new school (School "B") or is part of the booster club of School "B", including anyone acting on their behalf, has had 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, prior to the completion of the enrollment process at School "B". I also 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 new school (School "B"). (*See Bylaw 510 for definition of a non-school athletic team).

NOTE: BELOW YOU WILL SIGN ITEM 7 OR ITEM 8. DO NOT SIGN BOTH SECTIONS. READ CAREFULLY.

7) IF THE ABOVE STATEMENTS (UNDER CERTIFICATION OF APPLICATION) ARE TRUE SIGN BELOW. YOU WILL NOT NEED TO PROCEED TO ITEM 7. IF YOU CANNOT CERTIFY THE ABOVE STATEMENTS, DO NOT SIGN ITEM 6. SKIP TO ITEM 7 BELOW AND SIGN THERE.

PARENT SIGNATURE DATE STUDENT SIGNATURE DATE

OR

8) I AM UNABLE TO CERTIFY THAT SOME OR ALL OF THE ABOVE STATEMENTS ARE TRUE. THEREFORE, AS REQUIRED, I AM SUBMITTING A COMPLETE WRITTEN DISCLOSURE OF THE SPECIFIC. (ATTACH A WRITTEN EXPLANATION TO THIS FORM).

PARENT SIGNATURE DATE STUDENT SIGNATURE DATE