



Rochester Public Schools Athletic Department Transfer Form

In order for the student-athlete to be fully eligible to participate in co-curricular athletics and activities the following questions must be answered and this form submitted to the Site Coordinator.

- **It maybe several days before you will be issued your "card" for participation.**
- **Please include a transcript from your previous school – foreign Students must provide an English transcript.**

1. Student Name (Print – First, Middle, Last): _____

2. Students Address: _____ City: _____ State: _____

3. Student's Grade in School: _____ 4. Student's Age: _____

5. Date Student First Entered 9th Grade: _____

6. School Where Student First Entered 9th Grade: _____

7. Students first date of enrollment into ISD # 535 and school of enrollment? _____

8. Is this student's first transfer? **Yes No** If no, please explain previous transfer.

9. Can the student provide a current medical physical indicating fitness to participate? **Yes No**

10. Was the student in good standing (Academically, Behaviorally, and/or Chemical Violations) at the time of transfer? **Yes No**
if no, please explain:

11. Do you have a letter from the student's previous school stating the student's eligibility status/good standing at the time of the student's transfer? **Yes No** TRANSFER ELIGIBILITY STATUS FORM REQUIRED FROM PREVIOUS SCHOOL – PAGE 2

12. Is the student under 20 years of age? **Yes No** Date of Birth: _____

13. Is the student fully enrolled in your school as defined by the Department of Children, Families and Learning - **Enrollment is complete at the Edison Building – Registration and Records?** **Yes No**

14. Has the student participated in fewer than four seasons in any sport beginning in the 9th grade? **Yes No**
If no, please identify the sport(s) in which the student has participated in more than four seasons.

15. Has the student completed the terminal grade in the previous school in the U.S. or foreign country or earned a GED? **Yes No**

16. Has the student repeated a grade? **Yes No** If yes, which grade did the student repeat? _____

17. Has the student completed 8 semesters of eligibility? **Yes No**

18. Has the student received money (played professionally) in an MSHSL-sponsored sport? **Yes No** If yes, please explain?

19. For Foreign Exchange or International Students, please identify the student visa type: J-I F-I N/A (U.S. Student – No Visa required)

20. In which activities will the student participate?

21. Did the student receive reduced tuition or a scholarship to attend school? **Yes No**
If yes, please identify the reason for the tuition/scholarship. Be complete in your response.

22. Do ALL family members (both parents and/or guardians and children) live at the address listed above? **Yes No**, If no, please explain.

Student Transfer Report

Date: _____

To: _____ A. D.
Receiving School

From: Paul Cox A. D.
Sending School

Re: _____
Transfer Student's Name



John Marshall High School

Fax: 507-287-2659

_____ has indicated that he/she is transferring to
Transfer Student's First & Last Name

Receiving School

Date Student first entered 9th grade

Name of school where student entered 9th grade

Following is an overview of the eligibility status:

- Student is eligible for all levels of competition at time of withdrawal.
- Student is NOT eligible due to violations or transfer rule (see below)
- Student has participated on a Varsity, Jr. varsity or B-team (sophomore team)

If the student is not eligible, please check all of the following that apply:

- Academic progress
- Age
- Amateur violation
- Camp/clinic violation
- Drinking/smoking/chemical violation
- Student Code of Responsibilities (Bylaw 206)
- Non-school competition violation
- Semesters
- Racial, religious, sexual harassment/violence or hazing violation
- Transfer
- Other (please describe)

_____ has _____ of his/her penalty remaining at the time of withdrawal.
Transfer Student's First & Last Name(number of days/weeks/games)

(Please describe) _____

_____ has previous MSHSL violations and has served the penalty:

Students name

1. _____
Violation

2. _____
Violation

3. _____
Violation

The information above is accurate to the best of my ability.

Signature

Date

Phone