

REQUEST/VERIFICATION FORM FOR CHARTER SCHOOL STUDENT PARTICIPATION IN EXTRACURRICULAR ACTIVITY

(To be completed by the charter school administrator and student’s parent/legal guardian)

Pursuant to H. 3241 59-40-50 Section 6, a charter school student is eligible to participate in extracurricular activities at the student’s resident public school consistent with eligibility standards as applied to full-time students of the resident public school.

I understand the following conditions are required.

- The charter school student is requesting to participate in extracurricular activities at his/her residentially-assigned school (contact the Richland Two Planning Office).
- The charter school student must meet the appropriate requirements of the charter school education program as determined by the charter school governing board.
- The charter school student will agree to meet the same standards of academic performance, behavior and other identified requirements as all other Richland School District Two students.
- The charter school student must contact the residentially-assigned school to obtain all information involving dates and procedures for “tryouts.”
- The charter school student or parent/legal guardian will agree to pay any participation fees normally charged to all Richland School District Two students.
- The charter school does not offer a similar extracurricular program or activity.

The charter school student must agree to a release of educational records to the district necessary to verify compliance with participation requirements.

If approved and selected to participate, the charter school student is responsible for transportation to and from the extracurricular activity.

(To be completed by the parent/legal guardian)

Student information

Full name: _____

Home address: _____

Public school district*: _____ Public school: _____

Phone number: _____ Email: _____

Birth date (mm/dd/yy): _____ Grade level (for participating year): _____

(To be completed by the charter school administrator)

Charter school name: _____ Student name: _____

Extracurricular activity: _____ School year: _____

Name of charter school administrator: _____ Official title: _____

Administrator’s phone number: _____ Email: _____

Signature Date

Note: Send completed form to the designated administrator of the student’s residentially-assigned school AND send a copy to the Richland School District Two Planning Office: Fax Number: 803-738-7378 or rwiley@richland2.org

Parent/Legal guardian signature Date