

INSTRUCTIONS: This form may NOT be handwritten, and must be submitted for each student who has transferred to your school in the past twelve months from the date of the student transfer.

WARNING: Falsification of data on this form may result in institutional penalties such as fine and/or forfeitures of contests. It could result in the student being declared ineligible for any competition for a period of up to two years. It also could result in the transmission of a report of the falsification to the Professional Standards Commission if certified personnel were involved in the falsification.

SECTION A

DATE OF THE STUDENT TRANSFER

ACTIVITY

SCHOOL

CITY

SCHOOL YEAR

In-state Transfer

Out-of-state Transfer

Approved Foreign Exchange: Program

(Complete Section A and B Only)

NAME			DATE OF BIRTH			DATE STUDENT ENTERED 9 TH GRADE			UNITS EARNED <small>Prev Semester</small>	TOTAL UNITS EARNED	(This Column for GHSA use only) ELIGIBILITY STATUS
LAST	FIRST	MIDDLE	Mo.	Day	Year	Mo.	Day	Year			

Beginning & Ending Dates Attended Beginning with 9 th Grade (Give month, day, year)				Grade	Name of School	Address (City, State)

SECTION B - General Transfer Information

Present Home Address:

(Street)

(City, State)

(County)

Service Area for Present Home Address:

Lives With:

(Names)

(Relationship)

Previous Home Address:

(Street)

(City, State)

(County)

Service Area for Previous Home Address:

Persons Student Lived with at Previous Address:

(Names)

(Relationship)

Is the custodial parent a certified teacher, counselor or administrator at the receiving school (Grades 9-12)?

Was the student suspended or expelled (or facing such penalties) at the former school? (If yes, attach additional information)

Does the student qualify for a waiver due to a joint custody or a custody change? (If yes, attach court documents, including judge's signature)

SECTION C - Family and Residential Information (Complete only if a bona fide move is claimed)

☐ Yes ☐ No

Is this the first Bona Fide move since establishing eligibility with the GHSA?

To establish eligibility, the following **required documentation** must be submitted

Updated Driver's Licenses

☐ Yes ☐ No All licensed drivers in the household have updated their address with the Georgia DMV

Vacating the Former Residence

☐ Yes ☐ No All unnecessary utilities have been terminated

☐ Yes ☐ No All household goods and furniture have been moved to the new residence or placed in storage

☐ Yes ☐ No Documentation of utility termination, lease cancellation, or home sale contract is included

Proof of Sale or Lease Termination

☐ Yes ☐ No ☐ N/A If owned: New home documentation. Upload contract.

☐ Yes ☐ No ☐ N/A If leased: Lease cancellation documentation is provided. Upload new lese information.

Non-Use of Former Residence

☐ Yes ☐ No No member of the family unit is using or residing in the former residence

Change of Address Notifications

☐ Yes ☐ No ☐ N/A Proof of address change submitted to employer

☐ Yes ☐ No Proof of address change submitted to the U.S. Postal Service

Residency Requirement

- ☐ Family intends to maintain the new residence for at least one full calendar year
- ☐ Acknowledgment: Return to previous service area within one year will result in **migrant** classification

Second Transfers After a Bona Fide Move

☐ Acknowledgment: A second transfer after eligibility has been granted from a bona fide move will result in **migrant** status for one calendar year. Appeals on these decisions may be made to the Hardship Committee.

Parent/Guardian Athletic Eligibility Verification Form

- ☐ Parent/Guardian agrees and attests to meeting all eligibility requirements



(Signed* - Principal / Asst. Principal / AD)

(Signed* – Report Preparer)

(Date)

*By signing this form, I certify that a bona fide move has been made as defined in By-Law 1.62(a) I/We understand that providing false information shall result in a fine, an eligible ruling and the possibility of a report to the Professional Standards Commission.