

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 LAST FIRST MIDDLE	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
	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)

CURRENT RESIDENCE:
 Is the current residence being: _____ purchased; _____ leased; _____ rented?
 Do you claim multiple residences? _____ If "Yes", do you claim a Homestead Exemption on this residence? _____

PREVIOUS RESIDENCE:
 Have you relinquished your previous residence? _____
 If "Yes", how was it relinquished? _____ rented previously; _____ sold residence or have a contract for sale; _____ residence listed for sale at fair market value; _____ abandoned the house with unnecessary utilities shut off; _____ leased/rented residence at a fair market value.
 If "Yes", is the residence being leased/rented to a family member? _____. If "Yes", please list that individual and relationship: _____

VERIFICATION OF THE BONA FIDE MOVE: (Completed by school personnel)

_____ Conducted a site visit - if "Yes", who made the visit ? _____
 _____ Received documentation via utility bill, post office documentation, driver's license, etc. - if "Yes", what document? _____ (please upload a copy of document)

 (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.