# TAPPS

**Previous Athletic Participation Form**

**PART A**

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<th>STUDENT SIGNATURE / DATE:</th>
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<th>TAPPS CITY / SCHOOL:</th>
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<tr>
<th>STUDENT NAME:</th>
<th>STUDENT GRADE LEVEL</th>
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<td>9th 10th 11th 12th</td>
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1. ☐ Yes ☐ No Has the student ever practiced or participated in extracurricular athletic activities at another school? This includes before school, after school and during an athletic period. If the answer is Yes, PART B must be completed and both PART A and PART B forwarded to the District Vice President to begin the approval process. If the answer is No, then only PART A must be completed and filed with the school only.

2. ☐ Yes ☐ No Will or was the student 19 prior to September 1 of the current year.

3. ☐ Yes ☐ No Did the student ENROLL in the 9th grade more than 4 years ago?

4. ☐ Yes ☐ No Has the student repeated a grade in High School?

5. ☐ Yes ☐ No Is the student enrolled in at least 4 classes at the present school?

6. ☐ Yes ☐ No Does the student presently reside with parent(s) (either birth or adoptive parents)?

   **If No to Questions #6**, a **Student not Living with Parent** form must be completed and approved prior to VARSITY participation.

7. ☐ Yes ☐ No Is the student a citizen of the United States?

   **If No to Questions #7**, a **Foreign Student Application** must be completed and approved prior to VARSITY participation.

8. ☐ Yes ☐ No Is the student presently under suspension or ineligible to participate in extracurricular activities at the previous school?

9. ☐ Yes ☐ No Communicated with any coach at the school about ATHLETIC PARTICIPATION?

10. ☐ Yes ☐ No Communicated with any booster club member or school board member about ATHLETIC PARTICIPATION?

11. ☐ Yes ☐ No Attended a SPORTS CAMP at this school?

12. ☐ Yes ☐ No Participated on an AAU, CLUB, or similar team coached or operated by a coach at this school?

13. ☐ Yes ☐ No Participated in an OFF SEASON League on a team coached or operated by a coach at this school?

14. ☐ Yes ☐ No Received individual or GROUP INSTRUCTION, paid or unpaid, from any coach at this school?

15. ☐ Yes ☐ No Been promised a SCHOLARSHIP for ATHLETIC PARTICIPATION from this school or representative of school?

16. ☐ Yes ☐ No Attended a tryout to determine eligibility for ATHLETIC PARTICIPATION at this school?

17. ☐ Yes ☐ No Has the student been STATE or NATIONALLY ranked in an EXTRACURRICULAR ATHLETIC ACTIVITY?

18. ☐ Yes ☐ No Has the student participated on a NATIONAL TEAM in an EXTRACURRICULAR ATHLETIC ACTIVITY?

19. ☐ Yes ☐ No Has the student received lodging or meals as a result of playing on an AAU, Club, or similar team?

20. ☐ Yes ☐ No Has the student received a “scholarship” to participate on an AAU, Club or similar team?

21. ☐ Yes ☐ No Has the student received merchandise or other valuable consideration for participation in an ATHLETIC ACTIVITY?

22. ☐ Yes ☐ No Has the student been promised payment of expenses or financial aid based on ATHLETIC ACTIVITY at this school?

23. ☐ Yes ☐ No Has the student been promised college scholarships or placement based on ATHLETIC ACTIVITY at this school?

24. ☐ Yes ☐ No Has the family agreed to pay individuals future sums for past or present representation in an ATHLETIC ACTIVITY?

25. ☐ Yes ☐ No Has the student missed extended classroom time to participate in national or international competitions?

By signature below, we attest that the above information is factual, true and correct. We understand that if information is later determined to be incorrect or untrue, the eligibility of the student would be in jeopardy and any contests in which the student participated would be subject to forfeiture by the school.

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TAPPS
Previous Athletic Participation Form
PART B

STUDENT NAME: ____________________________________________
STUDENT ADDRESS: ____________________________________________
PRESENT CITY / SCHOOL: ____________________________________________
FORMER CITY / SCHOOL: ____________________________________________
DATE OF 1ST CONTACT WITH SCHOOL: ___________ DATE OF ENROLLMENT: ___________
DATE OF 1ST ATTENDANCE AT SCHOOL: ___________ GRADE LEVEL: [ ] 9 [ ] 10 [ ] 11 [ ] 12
DATE OF WITHDRAWL FROM PREVIOUS SCHOOL: ___________

CERTIFICATION OF PARENT
We certify that neither my child nor I have been offered nor accepted any inducement based on my child’s athletic ability or contribution to an athletic team in accordance with Section 87 of the TAPPS By-Laws. Additionally, my child is in compliance with all TRANSFER policies as outlined in Section 104 of the TAPPS By-Laws. The new school has presented information regarding TAPPS eligibility for our review prior to signature of this document. If unsure of compliance, please consult school Athletic Director prior to signature.

_________________________________________________          ___________________________________________________
PARENT SIGNATURE / DATE                                    STUDENT SIGNATURE / DATE

CERTIFICATION OF NEW SCHOOL
We certify that to the best of our knowledge, no one has offered any inducement to the student or parent to transfer to our school. We certify that the student was not induced by anyone for athletic purposes. We reviewed all information and circumstances pertaining to this student’s transfer to our school and certify that the TAPPS By-Laws have been upheld. The new school has presented information regarding TAPPS eligibility for review prior to signature of this document.

_________________________________________________          ___________________________________________________
HEAD ADMINISTRATOR SIGNATURE / DATE                          ATHLETIC DIRECTOR SIGNATURE / DATE

CERTIFICATION AND RELEASE BY FORMER SCHOOL
We certify the following answers to be true and accurate to the best of our knowledge.

1. [ ] Yes [ ] No Was this student ever suspended or removed from an athletic program in your school?
2. [ ] Yes [ ] No Would the student have been prohibited from athletic participation had they not changed schools?
3. [ ] Yes [ ] No Is the previous school an alternative school in which the student was placed?
4. [ ] Yes [ ] No Based on your knowledge, did the student participate on any AAU, club or similar team coached by a coach at the new school?
5. [ ] Yes [ ] No Based on your knowledge, did the student participate on any off-season league team coached by a coach at the new school?
6. [ ] Yes [ ] No Based on your knowledge, did the student receive private or group instruction by a coach at the new school?
7. [ ] Yes [ ] No Was this student induced to attend another school?

_________________________________________________          ___________________________________________________
HEAD ADMINISTRATOR SIGNATURE / DATE                          ATHLETIC DIRECTOR SIGNATURE / DATE

CERTIFICATION OF DISTRICT
The above named student is not eligible for VARSITY participation until approved by the District Executive Committee or its representatives. The committee should review both PART A and PART B of the transfer form prior to approval. All yes answers should be reviewed prior to approval.

_________________________________________________          ___________________________________________________
DISTRICT PRESIDENT SIGNATURE / DATE                          DISTRICT VICE PRESIDENT SIGNATURE / DATE

CLASSIFICATION: 1A 2A 3A 4A 5A DI DII DIII
DISTRICT: 1 2 3 4 5 6 7 8