



TRANSFER ELIGIBILITY CHECKLIST

Preface:

A member or associate member school shall not permit any student, including any transfer student, to compete until such time as the school reasonably reliable proof that the student is eligible to compete for the member or associate member school under the rules of 281---36.15(1).

Name of High School: _____

City: _____

Name of Student: _____

Grade: _____

Previous School of Attendance (school transferring from): _____

FOR PARENT/LEGAL GUARDIAN – Indicate type of transfer (check one)

_____ **General Transfer (move into district)**

- A. Where does the student currently reside? Address: _____
- B. Documentation provided to verify current address (check all that apply and attach documentation):
 - 1. _____ Purchase agreement for current residence
 - 2. _____ Rental agreement and receipt of deposit for an apartment leased
 - 3. _____ Utility bill indicating new address
 - 4. _____ Driver's license indicating new address
 - 5. _____ Voter registration indicating new address
 - 6. _____ Other proof (please describe) _____
- C. Name of all person(s) who live at address provided above: (attach additional page, if necessary) _____
- D. Relationship of the person(s) residing at the above address to student: _____
- E. Does the student's **ENTIRE** immediate family reside at this address? Yes _____ No _____ (If no, explain: _____)
- F. What is the status of the previous primary residence? (Check all that apply and attach documentation)
 - 1. _____ The home has been sold.
 - 2. _____ The home is listed for sale.
 - 3. _____ The home has not been sold nor is the house listed for sale.
 - 4. _____ The rental agreement for the previous residence has been terminated
 - 5. _____ Other – attach explanation. _____
- G. Do the parents of the student live separately? Yes ___ No _____
- H. If answer to G is, "Yes:"
 - 1. Are the parents divorced? Yes ___ No _____
 - 2. Are the parents legally separated as per Court Order? Yes ___ No _____
 - 3. Has there been a legal change in the primary custodial parent as per Court Order? Yes ___ No _____
 - 4. If "yes" to H 1, 2 or 3, please attach a copy of the Court Ordered Decree _____
 - 5. Is there another non-school related reason why the parents live separately (e.g., employment reasons, need for medical treatment or rehabilitation, family counseling, parents never lived together)? Yes ___ No _____ If "yes," please explain: _____
- I. Has a legal guardianship been established? If "Yes," provide documentation. Yes ___ No _____
- J. Is the student 18 years of age or emancipated? Yes ___ No _____
- K. If the answer to I or J is, "Yes," what is the reason for the transfer? _____
- L. Do you claim there has been a founded case of harassment or bullying, as defined in Iowa Code Section 280.28, while attending school in a **non-public** school? Yes ___ No _____
 - 1. If yes, attach letter from non-public school acknowledging a founded case of harassment or bullying. _____

_____ **Open Enrollment Transfer**

- A. _____ Do you claim there has been a founded case of harassment or bullying, as defined in Iowa Code Section 280.28, while attending school in the district of residence. Yes ___ No _____
 - 1. If yes, attach open enrollment form from school district of residence, acknowledging a founded case of _____

harassment or bullying

_____ Resident of Another School District

_____ Intra-District Transfer (multiple high school district)

Signature of Parent/Legal Guardian is acknowledgement that the above information is affirmed as being accurate. Parent/Legal

Guardian Signature: _____ Date: _____

FOR SCHOOL ADMINISTRATOR – Check or date when verified

- _____ 1. Residence verified - Address _____
- _____ 2. Receipt of transcript from previous school
- _____ 3. Birth date verified
- _____ 4. 9th grade entry date verified
- _____ 5. Academic eligibility verified
- _____ 6. Good conduct eligibility verified, if applicable locally
- _____ 7. Athletic physical verified
- _____ 8. "Heads Up: Concussion in High School Sports" fact sheet verified
- _____ 9. Other eligibility items required locally: _____

Upon verification of items 1-9, the student is eligible for non-varsity competition.

FOR VARSITY LEVEL ELIGIBILITY ONLY. . . Upon completion and verification of the above checklist, the school must determine varsity-level eligibility status based on transfer rules outlined in Chapter 36 of the Iowa Administrative Code. If a student does not meet the conditions for immediate eligibility as per IAC 36.15(3) or 36.15(4), the appropriate governing body (IHSAA or IGHSAU) should be contacted. If any additional questions exist regarding eligibility status, contact the appropriate governing body (IHSAA or IGHSAU) **prior to** allowing participation. **THIS FORM MUST BE COMPLETED AND VERIFIED IN ITS ENTIRETY IF VARSITY ELIGIBILITY IS TO BE CONSIDERED.**

I, the undersigned, certify that all of the necessary documentation and verifications have been completed on behalf of the above-named student to determine her/his eligibility. For varsity- level competition and based upon the information in these documents, the student is (check one of the following):

_____ **ELIGIBLE per exception 281.36.15(3) a**

- _____ (1) Contemporaneous change in parental residence,
- _____ (2) Whole-grade sharing agreement between the student's resident district and the new school district of attendance
- _____ (3) Student returning to district to live with parents
- _____ (4) Residence changed due to: adoption, placement in foster or shelter care, placement in foreign exchange program, placed in juvenile correction facility, placement in substance abuse program, participation in mental health program, student becomes ward of the court, change in parents' marital relationship and/or court ordered change in custody.
- _____ (5) Cooperative sharing agreement
- _____ (6) Parents change residence but student is remaining in district of attendance without interruption
- _____ (7) Special education student who is placed in another district
- _____ (8) Attending district finds that student is homeless as per 281-33.2(256)

_____ **INELIGIBLE**

If ineligible, list findings for ineligibility: _____

School Administrator: _____ Date: _____
(Name and Title)

THIS FORM IS ONLY CONSIDERED COMPLETE WHEN PARENT/LEGAL GUARDIAN AND SCHOOL ADMINISTRATOR HAVE SIGNED.