

**PENNSYLVANIA INTERSCHOLASTIC ATHLETIC ASSOCIATION, INC. (PIAA)
MEMBER SCHOOL ATHLETIC TRANSFER WAIVER REQUEST FORM**

(Revised April 12, 2022)

Pursuant to ARTICLE VI. TRANSFERS, RESIDENCE, AND RECRUITING, Section 5, Regional Panel or District Committee Review, of the PIAA By-Laws, The Principal of a PIAA member school to which a student transferred, who is not otherwise eligible under Section 3, Presumptive Eligibility, subsections A through H, may request a waiver of ARTICLE VI, Section 4, Ineligible Students, from, as applicable under the circumstances, either a Regional Panel or the District Committee having jurisdiction over that Principal's school by (1) completing Sections 1 and 2 of that Form; (2) having the student's parent(s) or guardian(s) complete and sign Section 3 of that Form; (3) thereafter completing and signing either Section 4A or 4B of that Form; (4) routing that Form to the Principal of the school from which the student transferred, for that Principal to complete and sign either Section 5A or 5B; (5) having that Principal return that Form to the Principal of the PIAA member school to which the student transferred; and (6) then submitting that completed and properly executed Form to, as applicable under the circumstances, either a Regional Panel or the District Committee having jurisdiction over the Principal's school to which the student transferred, for either that Regional Panel's or District Committee's consideration.

(PLEASE PRINT OR TYPE)

DATE: _____

Timing: A receiving school Principal before any student whose eligibility must be determined using this form shall initiate this form after the student has been enrolled in their school and is no longer in attendance at their previous school. The receiving school Principal shall forward this form to the sending school upon completion and without undue delay.

SECTION 1. RECEIVING MEMBER SCHOOL INFORMATION

- A. Full Name of Principal: _____
- B. Member School: _____
- C. Member School Address: _____

- D. Member School Phone No.: () _____ Member School Fax No.: () _____

SECTION 2. TRANSFERRING STUDENT INFORMATION

- A. Full Name of Student: _____ Grade _____
(First) (Middle) (Last)
- B. Place of Residence: _____
(Street Address) (City) (State) (Zip Code)
- C. Name(s) of the head of household in which the transferring student resides: _____
Relationship to the student: _____
- D. Residence is located within the boundaries of the _____ Public School District
- E. Date of Student's Birth: ____/____/____
- F. Age of Student on Last Birthday: _____
- G. Date Student Enrolled for the Current School Year: ____/____/____
- H. Summary of Student's School(s) Attended and Sport Participation in Each Season:

GRADE	SCHOOL YEAR	SCHOOL ATTENDED	LIST SPORT PARTICIPATION IN EACH SEASON		
			FALL	WINTER	SPRING
7					

SECTION 3. TRANSFERRING STUDENT'S REASON(S) FOR TRANSFERRING

- A. The transferring student and/or the student's parent(s) or guardian(s) should set forth the reason(s) for the Transfer:

(Attach Additional Sheet[s] if Necessary)