

SASKATCHEWAN HIGH SCHOOLS ATHLETIC ASSOCIATION

SHSAA STUDENT TRANSFER FORM

Before completing this form, please review SHSAA Bylaw referred to as “Eligibility to Represent School Teams” located in the SHSAA Handbook (available on SHSAA website at www.shsaa.ca). Forms only need to be completed for those students who do not meet the criteria outlined in 1 a) and/or b); or 2 a) and/or b).

Student Name: _____

Date of Birth (D/M/Y): ____/____/____ Grade: _____

Year of Entry into Grade 10: _____

If not September, please note month here: _____

School Attended in Grade 10 _____

Transferring from: _____ school to: _____ school

Date of acceptance into new school (D/M/Y): ____/____/____

Declaration from parent and student: In signing below, I acknowledge that:

1. The student named above is **INELIGIBLE** to represent the new school in any SHSAA sanctioned activity should the above student be currently in his/her Grade 10-12 year of SHSAA eligibility under SHSAA Bylaw Eligibility to Represent School Teams 3) a-d).
2. The primary reason for this transfer is for an educational purpose. The transfer is not being made primarily for an athletic purpose so that the student can participate in athletics.
3. The student named above is not allowed to participate in SHSAA governed activities at a second school in the same sport during the same season, except in the event that the SHSAA determines that there has been a bona fide change in residence of the parent(s) or legal guardian(s) of the student, or a change of legal guardianship of the student contemporaneously with the change in residence of the student (subject to limitations noted in SHSAA Transfer Policy).

Parent (Legal Guardian) signature: _____

Student signature: _____

Parent/Guardian name (please print): _____

Date (D/M/Y): ____/____/____

Declaration from the Principal and Athletic Director: *We, the undersigned school principal and athletic director, confirm that the student identified above has transferred schools as noted. We accept the declaration from the parent and the student as valid. **We understand that this student is INELIGIBLE for school sport in any SHSAA sanctioned contest until the student's eligibility is re-established. The parent/legal guardian is to complete the transfer information form which is available on line. We understand that the SCHOOL must submit the proper forms on behalf of the student's parent/legal guardian to the SHSAA Executive Council. These documents must be received into the SHSAA office by:***

- *Second Wednesday of September, 2017*
- *First Wednesday of December, 2017*
- *First Wednesday in January, 2018*
- *First Wednesday in April, 2018*
- *First Wednesday in May, 2018*

RECEIVING SCHOOL: _____

Principal's signature: _____

Date: ____/____/____

Athletic Director's signature: _____

Date: ____/____/____

FAX TO:

SHSAA Office – Fax (306) 721-2659

MAIL TO:

SHSAA Office
#1 – 575 Park Street
REGINA SK
S4N 5B2

EMAIL TO:

shsaa@shsaa.ca

This is the September 2017 Form: Please crosscheck with the Transfer form located on the SHSAA website for updates. In the event of discrepancies, the form on the SHSAA website supersedes this form.

****PLEASE COMPLETE AND SUBMIT THE TRANSFER INFORMATION FORM WITH ALL REQUESTS.**