

New Mexico Activities Association

6600 Palomas Ave NE • Albuquerque,
NM 87109
505-923-3110 • Fax: 505-923-3114
Toll Free 1-888-820-6622



**Form
C
Transfer Record
From Previous School(s)**

TO BE COMPLETED BY PETITIONING SCHOOL:

This form, for the entire previous school year, is a required part of the NMAA petitioning process. When determining the eligibility of students, it is the school's responsibility to read and follow all sections of the NMAA Handbook. No ruling is final unless received in writing or by facsimile.

STUDENT'S NAME _____ **BIRTHDATE** _____

PETITIONING SCHOOL _____ **FIRST DAY OF 19/20 SCHOOL YEAR** _____

DATE STUDENT ENROLLED AT PETITIONING SCHOOL _____ **GRADE ENTERING** _____

PREVIOUS SCHOOL ATTENDED _____

STUDENT'S CURRENT ADDRESS _____

IS THIS ADDRESS IN YOUR SCHOOL'S ATTENDANCE ZONE? **YES** **NO**

STUDENTS PHYSICAL ADDRESS AT PREVIOUS SCHOOL (if applicable):

STUDENT'S PARENT(S) NAMES:

STUDENT'S SIBLINGS – NAMES, AGES AND SCHOOLS ATTENDING:

The information called for on this form is necessary for determining eligibility for participation in interscholastic athletics/activities of the above-named student, who was previously enrolled at your school. A prompt response will be appreciated.

Athletic Director Signature

Date

Parent(s) Signature

Date

Second page needs to be started by petitioning school (Student's Name, Petitioning School, and Petitioning School Fax Number) and then both pages sent to former school to be completed and returned back to Petitioning School

STUDENT'S NAME _____

PETITIONING SCHOOL _____

PETITIONING SCHOOL FAX NUMBER _____

REST TO BE COMPLETED BY PREVIOUS SCHOOL: NMAA FORM C TRANSFER RECORD
AFTER COMPLETION, PLEASE RETURN VIA FAX TO PETITIONING SCHOOL

1. Enrollment in any high school. List **all** schools attended, including partial and/or broken semesters.
- | | Dates Attended | School (Name and Address) |
|---------------------------|----------------|---------------------------|
| a. 8 th Grade | _____ | _____ |
| b. 9 th Grade | _____ | _____ |
| c. 10 th Grade | _____ | _____ |
| d. 11 th Grade | _____ | _____ |
| e. 12 th Grade | _____ | _____ |

2. Parent(s)/Guardian(s) name(s) _____

3. Physical address of parent(s)/guardian(s) when student was enrolled in your high school:

4. Is this address in your school's attendance zone? Yes No

5. Indicate by a checkmark those sports participated in during the 18/19 and 19/20 school years. Include all sports in which student's name appeared on an eligibility list for a high school team at any level (varsity or sub-varsity).
Please also indicate if student has practiced and/or participated with a particular sport team five (5) or more days after the tryout period during the current (19-20) school year. *Please fill out completely.

	18/19	19/20		18/19	19/20		18/19	19/20		18/19	19/20
Baseball			Basketball			Cross Country			Football		
Golf			Soccer			Softball			Swimming		
Tennis			Track			Volleyball			Wrestling		
Bowling			Dance			Did Not Participate in Sports or Spirit					
Cheer											

6. Did this student participate in tryouts at your school during the 2019-2020 school year? Yes No
If "yes" please list which sport(s): _____

7. Does this student have any fines, fees and/or outstanding debts owed to the school? Yes No
If "yes" please explain: _____

8. Would this student have been scholastically eligible for athletics if he/she had remained at your school?
 Yes No
If "no", please explain: _____

9. Did this student have attendance issues at your school? Yes No
If "yes", please explain: _____

10. Did this student have a clean discipline record at your school? Yes No
If "no" please explain: _____

11. Do you believe that this student was in any way encouraged or recruited for transfer for athletic purposes?
 Yes No
If "yes" please explain: _____

12. Are there additional investigations we should make? Yes No
If "yes" please explain, including name and address of any person that should be contacted: (Attach a separate sheet if necessary.) _____

13. Please give any additional information that may assist us in the determination of the eligibility status of this student. We desire to be fair to the student, your school and to the rules to which we have subscribed.

I hereby certify that the above information is accurate and complete:

Athletic Director's Signature & Date

School Name/District