

TEXAS CHRISTIAN ATHLETIC FELLOWSHIP
Official Transfer Eligibility Statement

Students who participated in a sport in either sub-varsity or varsity in ninth through twelfth grades during the current or previous school year at another school must have this form complete, as well as approved by the District Chair before they are eligible to participate at the varsity level in said sport.

Student Name _____

Former School _____

Address _____

Phone Number _____

Administrator/Principal _____

New School _____

Address _____

Phone Number _____

Administrator/Principal _____

Date of Transfer _____ Before School Year Began (circle one) YES NO

If no, give a brief reason for the transfer.

Certification Statement

We certify that, to the best of our knowledge, that no undo influence was exerted upon the student or parents to transfer schools for strictly athletic purposes. Furthermore, I(Administrator/Principal) certify that, to the best of my knowledge, no one connected with our school exerted upon the student or parents any inducements or privileges not afforded to any other student coming to our school who does not participate in athletics.
(BOTH SIGNATURES REQUIRED.)

School Administrator/Principal _____

Athletic Director _____

Certification of Parents

I certify that I (we), as parent(s), are not placing our child(ren) in this school strictly for athletic purposes and there was no pressure or inducements to us, or our child(ren), from anyone at this school.

District Chair _____ School _____