

TO BE USED BY GUIDANCE OFFICES FOR ALL
TRANSFERS AND FORWARDED TO
ATHLETIC DIRECTORS

TRANSFER STUDENT INFORMATION

All transfers in grades 9-12 must complete this form. Upon completion, forward to the Athletic Office.

Student's Name _____ Date of Birth _____
Date of transfer _____ Grade level _____
Current Address _____

Date of entrance into the ninth grade _____

Parents' Names _____
Current Address (es) _____

Telephone Numbers _____

How long has student resided at the current address? _____

With whom is student residing? _____

Relationship of this (these) person(s)? _____

Reason for transfer _____

Student's previous address _____

How long did student reside at previous address? _____

With whom did student reside at previous address? _____

Relationship of this (these) person(s)? _____

PREVIOUS SCHOOL _____

Previous School Address _____

Date of entry into previous school _____

Did student participate in interscholastic athletics at previous school?

YES NO

If Yes, please complete Sport History page.

PAGE TWO

To be completed by the school the student **PREVIOUSLY** attended and returned to:

**Marco Lanzoni, Athletic Director
Spackenkill High School
112 Spackenkill Road
Poughkeepsie, NY 12603
Email: marco.lanzoni@sufsdny.org
Fax #845-463-7833**

Name of Student _____

Name of School Student Attended Prior to Transfer _____

Address of School _____

Date of entrance to this school _____

Date of entrance into the ninth grade _____

Date of withdrawal from this school _____

Reason for withdrawal _____

Student's address while attending the above school _____

With whom did student reside at this address? _____

Relationship of this (these) person(s)? _____

Did student participate in interscholastic athletics at previous school? Yes _____ No _____

If Yes, please complete Sport History on page three.

The undersigned have no knowledge that the student named herein has transferred to his/her present school with inducement, recruitment or having sought an athletic advantage.

Superintendent's Signature _____ Date _____

Principal's Signature _____ Date _____

Athletic Director's Signature _____ Date _____

If unsigned, please state reason(s) _____

PAGE THREE
TRANSFER STUDENT SPORT HISTORY

Student Name

School

	<u>YEAR</u>	<u>SPORT</u>	<u>LEVEL</u>	<u>SCHOOL</u>
9 th Grade	_____	_____	_____	_____
		_____	_____	_____
		_____	_____	_____
10 th Grade	_____	_____	_____	_____
		_____	_____	_____
		_____	_____	_____
11 th Grade	_____	_____	_____	_____
		_____	_____	_____
		_____	_____	_____
12 th Grade	_____	_____	_____	_____
		_____	_____	_____
		_____	_____	_____

Athletic Director Signature

Date