



### ALL TRANSFERS WILL BE COMPLETED ONLINE BY VILLANOVA. VILLANOVA WILL UPLOAD THIS SIGNED DOCUMENT TO THE CASE FILE IN CIF-SS HOME.

Name of Parent(s)/Guardi Current Address	.,			Date of Birth	Grade		Area Code/Home Phone		
Current Address									
			_						
	House Number and Street	House Number and Street Name			City/State/Zip				
PUBLIC SCHOOL DI	DISTRICT YOUR CURRENT ADDR	ESS IS IN		SPECIFIC PUE	SPECIFIC PUBLIC H.S. YOUR CURRENT ADDRESS BELONGS TO				
Date entire family unit occ	cupied current address:								
					T SCHOOL A	ATTENDANCE	AREA INTO A		
Former Address									
	House Number and Street	t Name			C	City/State/Zip			
PUBLIC SCHOOL DI	STRICT YOUR FORMER ADDRE!	SS WAS IN		SPECIFIC PUB	JLIC H.S. YOU	JR FORMER ADD	RESS BELONGED TO		
Date entire family unit vac	cated previous address:								
			<b>STARTIN</b>	G THE 9TH GRADE. IF T	HIS IS YOUR	FIRST TRANSFI	ER SINCE STARTING 9TH		
Transfer From:				Enrolled from:		to	Date MM/DD/YY		
Transfer From:	Name of Former High Scho	loc		Enrolled from:					
	Name of Former High Scho	ool		-					
Fransfer From:	Name of Former High Sch	1001		Enrollea from.	Date MM/D <sup>r</sup>		Date MM/DD/YY		
blayed at <u>EVERY</u> level (nov				the official high scho	ool season)	) at your forme	r school/s? List sports		
ALL SEASON:									
WINTER SEASON:									
SPRING SEASON:									
			47 F	A NOT SIGN B(	ידה אבט	ארטידי RF			
NUIE: DELOW 100			<u>ים</u> . <i>ו</i> ו	UNUT SIGN LL			AU CAREI ULLI.		
CIF and to discuss enrollme determination. I am authori urther affirm that I understa vas granted on false, erron athlete may result. By signi B") or is part of the booste hrough intermediaries or o his student, prior to the con previous 24 months on any	nent and/or extra curricular p rized to execute this request tand that if subsequent to the neous, inaccurate or incomp ning this affidavit, I certify that er club of School "B", includi otherwise with this transfer so completion of the enrollment p y non-school athletic team*	participatic st. I affirm the the approva nplete inform hat no perso ding anyone student, st process at * (i.e., AAU,	ion with that all o val of this rmation, son/s co ne acting student's at Schoo J, Ameri	the CIF. I authorize to of the above stateme is athletic eligibility ap n, severe penalties aff onnected with the ath ng on their behalf, has 's parents, legal guard ol "B". I also certify the rican Legion, club tea	the CIF to u nents are true application, it ffecting the f hletic depart as had comm rdian or care hat the stude am, etc.) tha	use that inform ue to the best of it is discovered future eligibilit rtment of the n munication, dir regiver, or anyo dent has not pa at is associate	nation in making its of my knowledge. I d that this approval ty of this student- new school (School rectly or indirectly, rone acting on behalf o articipated during the		
	FELY DIFFERENT ATTENU         Former Address         PUBLIC SCHOOL DIS         Date entire family unit vac         NOTE: INCLUDE ALL HIGH SCI         GRADE, YOU WILL ONLY NEED         Transfer From:         Transfer From:         /ithin the last calendar yea         layed at EVERY level (nor         ALL SEASON:         /INTER SEASON:         PRING SEASON:         NOTE: BELOW YOU         ERTIFICATION OF APPI         IF and to discuss enrollme         etermination. I am authori         wither affirm that I understations are granted on false, error         as granted on false, error         bildete may result. By signi         and to the booste         arough intermediaries or o         bildeten, prior to the con         bildeten, prior to	TELY DIFFERENT ATTENDANCE AREA. IF YOU HAVE         Former Address         House Number and Street         PUBLIC SCHOOL DISTRICT YOUR FORMER ADDRES         Date entire family unit vacated previous address:         NOTE: INCLUDE ALL HIGH SCHOOLS STUDENT HAS ATTEND         GRADE, YOU WILL ONLY NEED TO FILL OUT THE 1ST LINE OF         Transfer From:         Name of Former High School         ALL SEASON:         VINTER SEASON:         PRING SEASON:         Stant to discuss enrollment and/or extra curricular petermination. I am authorized to execute this request inther affirm that I understand that if subsequent to thas granted on false, erroneous, inaccurate or incompatibility that 3") or is part of the booster club of School "B", includ rough intermediaries or otherwise with this transfer shis student, prior to the completion of the enrollment revious 24 months on any non-school athletic team*	ETELY DIFFERENT ATTENDANCE AREA. IF YOU HAVEN'T MOVE         Former Address         House Number and Street Name         PUBLIC SCHOOL DISTRICT YOUR FORMER ADDRESS WAS IN         Date entire family unit vacated previous address:         NOTE: INCLUDE ALL HIGH SCHOOLS STUDENT HAS ATTENDED SINCE S         STRADE, YOU WILL ONLY NEED TO FILL OUT THE 1ST LINE OF ITEM 4.         Transfer From:         Name of Former High School         ALL SEASON:         //INTER SEASON:         PRING SEASON:         NOTE: BELOW YOU WILL SIGN ITEM 6 OR ITEM         ERTIFICATION OF APPLICATION: I authorize any former sc         IF and to discuss enrollment and/or extra curricular participatic         etermination. I am authorized to execute this request. I affirm t         trither affirm that I understand that if subsequent to the approva         as granted on false, erroneous, inaccurate or incomplete inform         there may result. By signing this affidavit, I certify that no perse <t< td=""><td>ETELY DIFFERENT ATTENDANCE AREA. IF YOU HAVEN'T MOVED, SKIF         Former Address         House Number and Street Name         PUBLIC SCHOOL DISTRICT YOUR FORMER ADDRESS WAS IN         Date entire family unit vacated previous address:         NOTE: INCLUDE ALL HIGH SCHOOLS STUDENT HAS ATTENDED SINCE STARTING GRADE, YOU WILL ONLY NEED TO FILL OUT THE 1ST LINE OF ITEM 4.         Transfer From:         Name of Former High School         Vithin the last calendar year, what sport/s did the student play (during ayed at EVERY level (novice, frosh-soph, JV, and/or varsity).         ALL SEASON:         PRING SEASON:         PRING SEASON:         IF and to discuss enrollment and/or extra curricular participation with etermination. I am authorized to execute this request. I affirm that all or orther firm that 1 understand that if subsequent to the approval of this as granted on false, erroneous, inaccurate or incomplete information, there may result. By signing this affidavit, I certify that no person/s co 3t") or is part of the booster</td><td>ETELY DIFFERENT ATTENDANCE AREA. IF YOU HAVEN'T MOVED, SKIP TO ITEM 4.         Former Address         House Number and Street Name         PUBLIC SCHOOL DISTRICT YOUR FORMER ADDRESS WAS IN         SPECIFIC PUB         Date entire family unit vacated previous address:         NOTE: INCLUDE ALL HIGH SCHOOLS STUDENT HAS ATTENDED SINCE STARTING THE 9TH GRADE. IF T         SRADE, YOU WILL ONLY NEED TO FILL OUT THE 1ST LINE OF ITEM 4.         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	PARENT SIGNATURE	DATE		STUDENT SIGNATURE	DATE				
	OR								
7)	I AM UNABLE TO CERTIFY THAT SOME OR ALL OF THE ABOVE STATEMENTS ARE TRUE. THEREFORE, AS REQUIRED, I AM SUBMITTING A COMPLETE WRITTEN DISCLOSURE OF THE SPECIFIC. (ATTACH A WRITTEN EXPLANATION TO THIS FORM).								
	PARENT SIGNATURE	DATE		STUDENT SIGNATURE	DATE				
					Rev	vised 7/10/18			





#### Student Name:

## Name of Parent(s)/Guardian(s)/Caregiver(s):

## Grade entering at Villanova:

Has the student ever transferred before?

If "yes" to above, was the previous transfer a result of a FULL FAMILY move?

# Villanova will need the following information to complete the on-line transfer application for you. Note, the contact information you provide will need to be an administrative contact (Athletic Director, Assistant Principal or Principal)

School Name:

Contact's Position:

School Address:

City/State/Zip/Country:

Contact Name:

E-mail:

Attended From (dates of enrollment):

Additional Notes as needed (you must account for the student's whereabouts since entering the 9th grade):