



SAN FRANCISCO SECTION
555 PORTOLA DRIVE, BUNGALOW 2
San Francisco, CA 94131

**VALID CHANGE OF
 RESIDENCE/PRE-ENROLLMENT
 CONTACT AFFIDAVIT -FORM 206/510**

This form is to be utilized for all students transferring from one high school to another with a valid change of residence, and for foster students who have changed residence pursuant to a court order and are attempting to gain athletic eligibility.

CIF BYLAW 206B—CONTINUING RESIDENTIAL ELIGIBILITY

2. a. **Valid Residence**
 A valid residence is defined as the location where the student's parent(s), guardian(s), or caregiver(s) (with whom eligibility has been established) live with that student and thereby have the use and enjoyment of that location. A student (with the student's parent(s), guardian(s), or caregiver(s) with whom eligibility has been established) may only have one valid residence at one time.
- b. **Valid Change of Residence**
 Determination of what constitutes a valid change of residence depends upon the facts in each case, however, to be considered, the following facts must exist:
- (i) The original residence must be abandoned as a residence by the immediate family; AND
 - (ii) The student's entire immediate family must make the change and take with them the household goods and furniture appropriate to the circumstances. For eligibility purposes, a family unit may not maintain two or more residences; AND
 - (iii) The change of residence must be genuine, without fraud or deceit, and with permanent intent; AND
- NOTE:** A student who family makes a valid move into a new school boundary (see iv. below) is immediately residentially eligible for varsity competition. A subsequent move into a different school boundary by the family (or other family members) during the next 12 calendar months will result in the student being declared ineligible until cleared for competition by the Section Commissioner.
- (iv) Evidence must be submitted that a valid change of residence has occurred. (See opposite side for examples.)

COMPLETE STUDENT INFORMATION:

STUDENT _____ Please circle: **GRADE LEVEL**
 Last First Middle M F 9 10 11 12

PREVIOUS ADDRESS _____
 Street City Zip

CURRENT ADDRESS _____
 Street City Zip

TRANSFER FROM: _____ H.S. TRANSFER TO: _____ H.S.

Date entire family move was completed _____ Date of enrollment in New School _____
 mo/day/year mo/day/year

Sport(s) and level of participation in the previous twelve calendar months:

SCHOOLS SUBMITTING THIS FORM MUST VERIFY THAT THIS STUDENT HAS MADE A VALID CHANGE OF RESIDENCE IN ACCORDANCE WITH CIF BYLAWS:

Evidence must be submitted that a valid change of residence has occurred. No single document listed below or combination thereof establishes residency. The Section Commissioner and/or school has the discretion to request additional documents that he/she deems necessary to confirm residency. Evidence may include:		
• Telephone and utility service operative at the student's new residence and terminated at the former residence;		
• Proof of paying for utilities at the new residence including phone, gas, electricity, water, cable television, and garbage collection;		
• Proof of submitting a change of address to the U.S. Postal Service to receive mail at the new residence;		
• Proof of transfer of the parent's and age-appropriate student's motor vehicle registration		
• Proof of changed address on the parent's and age-appropriate student driver's license		
• Real estate documents indicating and verifying a change of residence (sale and purchase, for instance);		
• Utility service receipts;	• Voter registration listing the new address;	• Proof of entering a long-term lease;
• Property tax receipts	• Rent payment receipts	• Court documents indicating a change of residence;
• Declaration of residency executed by the student's parent or legal guardian		
• Other documentation that a Section or school district may require that establishes that a person is living at the new address.		

NOTE BEFORE SIGNING! Bylaw 202(B)(1):

If it is discovered that any parent, guardian, caregiver or student has provided false information in regards to any aspect of eligibility status on behalf of a student, that student is subject to immediate ineligibility for CIF competition at any level in any sport for a period of up to 24 calendar months from the date the determination was made that false information was provided.

510 PRE-ENROLLMENT CONTACT AFFIDAVIT (Bylaw 510) – #s 1, 2 and 3. Read carefully before signing!!!!

PARENT’S AND STUDENT STATEMENT’S #1, AND/OR 2, OR 3

1. SIGN IF TRUE: By signing this affidavit below, I certify that no person who is associated* with the athletic department of the enrolling (new) school (School “B”), or is part of the booster club of School “B” or who was acting on their behalf has had ANY communication, directly or indirectly, through intermediaries or otherwise with this transfer student, student’s parents, legal guardian or caregiver, or anyone acting on behalf of this student, prior to the completion of the enrollment process at School “B”. (Sign below only if this is a true statement. If not, sign statement #3 and attach an explanation). (*Associated is defined in CIF Bylaw 510. See below!)

Parent’s Signature	Date	Student’s Signature	Date
--------------------	------	---------------------	------

2. SIGN IF TRUE: By signing this affidavit below, I certify that the student has not participated during the previous 24 months on any non-school athletic team* (i.e., AAU, American Legion, club team, etc.) that is associated* with or coached by anyone associated* with the enrolling (new) school (School “B”). (*See Bylaw 510 for definition of a non-school athletic team.) (Sign below only if this is a true statement. If not, sign statement #3 and attach an explanation). (*Associated is defined in CIF Bylaw 510 – See below!)

Parent’s Signature	Date	Student’s Signature	Date
--------------------	------	---------------------	------

*(*CIF Bylaw 510 definition of Associated - Persons “associated” with a school include, but are not limited to: current or former coaches, current or former athletes, parent(s)/guardian(s)/caregiver of current or former student/athletes, booster club members, alumni, spouses or relatives of coaches, teachers and other employees, coaches who become employed, active applicants for coaching positions, and persons who are employed by companies or organizations that have donated athletic supplies, equipment or apparel to that school.)*

OR

3. SIGN IF EITHER #1 OR #2 ABOVE ARE NOT TRUE: I am unable to certify that one or both of the above statements are true. Therefore, as required, I am submitting a complete written disclosure of the specifics. (Attach the explanation to this form and be sure to include the names of any outside teams you have participated in the previous 24 months.) If the student participated on any outside teams in the previous 24 months from the date of enrollment at the enrolling school what outside teams did the student participate on?

List Teams: _____

Parent’s Signature	Date	Student’s Signature	Date
--------------------	------	---------------------	------

FORMER AND CURRENT/NEW SCHOOL 510 STATEMENTS

My signature below attests that to the best of my knowledge I have no credible** evidence of any person who is associated* with the athletic department of the new school (School “B”) or who is part of the booster club of the new school (School “B”) or who is acting on their behalf, having communication, directly or indirectly, through intermediaries or otherwise with the transfer student, student’s parents, legal guardian or caregiver, or anyone acting on behalf of the student, prior to the completion of the enrollment process. Furthermore, I am not aware of this student participating during the previous 24 months on any non-school athletic team* that is associated with the enrolling (new) school (School “B”). (*See Bylaw 510 for definition of a non-school athletic team; and the term “associated” (also listed above.)

<u>Former School Signatures</u>	<u>Current/New School Signatures</u>
Signature of Athletic Director of former school	Signature of Athletic Director of new school
<u>Date</u>	<u>Date</u>
Signature of Head Coach of former school (fall)	Signature of Head Coach of new school (fall)
<u>Sport</u> <u>Date</u>	<u>Sport</u> <u>Date</u>
Signature of Head Coach of former school (winter)	Signature of Head Coach of new school (winter)
<u>Sport</u> <u>Date</u>	<u>Sport</u> <u>Date</u>
Signature of Head Coach of former school (spring)	Signature of Head Coach of new school (spring)
<u>Sport</u> <u>Date</u>	<u>Sport</u> <u>Date</u>
Signature of Principal of former school	Signature of Principal of new school
<u>Date</u>	<u>Date</u>

OR	I am unable to certify that one or both of the above statements are true. Therefore, as required, I am submitting a complete written disclosure of the specifics. (Attach the explanation to this form-CHECK BELOW AND SIGN.)
Signature of FORMER Principal unable to certify statement above	Signature of NEW Principal unable to certify statement above.
<u>Date</u>	<u>Date</u>

SUBMIT THIS FORM TO THE SECTION OFFICE VIA MAIL OR FAX UPON COMPLETION.

- RETAIN A COPY FOR YOUR RECORDS.
- STUDENTS ARE NOT ELIGIBLE UNTIL THEY HAVE BEEN CLEARED BY THE SECTION OFFICE AND THE NEW SCHOOL HAS BEEN NOTIFIED.