

# TEXAS ASSOCIATION OF INDEPENDENT ATHLETIC ORGANIZATIONS

This form must be completed for any transferring student who has prior experience in participating in any High School level sports, activities and/or events and is now seeking to participating TAIAO sponsored sports, activities and/or events. This form should be completed and submitted to the Chairperson of the appropriate sports committee via email with a copy to the TAIAO offices (walldredge@austin.rr.com). Allow up to 10 days for a response from the committee. Prior to final approval the athlete may participate in practices and workouts, but MAY NOT PARTICIPATE IN ANY GAMES.

## Contact Information

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_  
Parent/Guardian 1: \_\_\_\_\_ Phone: \_\_\_\_\_  
Parent/Guardian 1 Email: \_\_\_\_\_  
Parent/Guardian 2: \_\_\_\_\_ Phone: \_\_\_\_\_  
Parent/Guardian 2 Email: \_\_\_\_\_  
School/Organization Transferring to: \_\_\_\_\_  
Athletic Director/Coach: \_\_\_\_\_ Phone: \_\_\_\_\_  
Athletic Director/Coach Email: \_\_\_\_\_

## Type of Transfer

TYPE of Transfer: FULL TRANSFER  PARTIAL TRANSFER  If Partial, which sport? \_\_\_\_\_

((A FULL transfer is a complete transfer from one school/organization to another for all sports and academic activities. A PARTIAL transfer is a transfer for only one sport, with the student remaining at the original school/organization for all other sports and academic activities. A PARTIAL transfer is only allowed if the student's original school/organization does not offer the sport in question, and is subject to all other transfer rules and guidelines.))

Transfer will be effective for what school year (Ex: 2017/2018): \_\_\_\_\_

## Previous School Section—To be completed by the former school/organization

Previous School/Organization Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Athletic Director/Coach: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Grade Classification of student for most recent school year: \_\_\_\_\_  
Sports played in most recent school year: \_\_\_\_\_  
Number of years student has played in any sport at High School level \_\_\_\_\_  
Has the student done anything to jeopardize their amateur athletic status? Yes  No   
Are you aware if anyone from the new school/organization contact the student prior to their enrollment in the new school? Yes  No   
Was the student ever prohibited from participation at your school? Yes  No   
Are you aware if the student has or will receive any financial assistance at the new school/organization? Yes  No   
Are you aware if the student will receive anything of value in return for attending the new school/organization? Yes  No   
If a PARTIAL Transfer, does your School/Organization offer the sport in question? Yes  No   
Was there any conflict or dissatisfaction between the student, his/her parents, and the athletic/academic supervisors at the previous school? YES  NO   
Did this student quit an athletic activity or program while enrolled in your school? Yes  No   
Was this student ever suspended or removed from your school athletic program? Yes  No   
Would this student be prohibited from participation in athletics had they not changes schools? Yes  No   
Based on your knowledge of the student and their circumstances, is this student changing schools for athletic purposes? Yes  No

USE DESIGNATED SECTION FOR ANY "YES" ANSWERS

## New School Certification—To be completed by the new school/organization

Are you aware of any conflict or dissatisfaction between the student, his/her parents, and the athletic/academic supervisors at previous school? Yes  No   
Did your school/organization make any contact with the athlete prior to their enrollment in your school/organization? Yes  No   
Will the student receive any financial aid, scholarships, discounts, or other inducements to attend your school? Yes  No   
Has anything of value been provided to the student or his/her family in return for his/her attendance at your school? Yes  No   
What grade classification will the student be competing at? FR  SO  JR  SR

USE DESIGNATED SECTION FOR ANY "YES" ANSWERS

TEXAS ASSOCIATION OF INDEPENDENT ATHLETIC ORGANIZATIONS

Transfer form P2

Explanation of "YES" Answers (use additional pages if necessary)

Lined area for providing explanations of "YES" answers.

Certification Section

We certify that all answers and written explanations to the above questions are true and correct, and that this transfer complies with the requirements and purposes of the TAI AO transfer rules and guidelines: The TAI AO rules on transfer: 1. Have been developed to protect student participation in TAI AO activities, events and contests; 2) Are intended to deter transfers by a student from one Member Organization to another based on monetary incentives; 3) Are intended to be designed to protect students who have previously participated in interscholastic competition at a Member Organization from being replaced by students who transfer for athletic or financial reasons, including the effects of student or family shopping for schools or being recruited for athletic purposes; and, 4. Are to encourage fair play, discourage the abuse of over enthusiastic promotion of Member Organization programs, and to protect the integrity of interscholastic athletic programs for both Member Organizations and TAI AO. (TAI AO GENERAL RULES Section 240 (A))

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Previous School Coach Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Previous School Admin Signature: \_\_\_\_\_ Date: \_\_\_\_\_

New School Coach Signature: \_\_\_\_\_ Date: \_\_\_\_\_

New School Admin Signature: \_\_\_\_\_ Date: \_\_\_\_\_

2 Signatures are required for PREVIOUS SCHOOL

Committee Review

Date of Submission? \_\_\_\_\_ Before Season Commencement? Y  N

The \_\_\_\_\_ (Fill in appropriate Committee Name) committee has reviewed this transfer request and finds the following:

- This request is approved as a FULL TRANSFER (List any limitations below)
 This request is approved as a PARTIAL TRANSFER (List any limitations below)
 This request is declined (Include reasons below)

Lined area for committee review notes.

Committee Chair Signature: \_\_\_\_\_ Date: \_\_\_\_\_