



# Albert Lea Public Schools

## Transfer Student Information

Please complete this form if you intend on participating in activities at ALHS.  
Return this completed form to the ALHS Activities Office.

Student Athlete Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_

Current Address, City, State, Zip: \_\_\_\_\_

Family E-mail: \_\_\_\_\_ Parent/Guardian Phone: \_\_\_\_\_

School District Attendance Area of current residence: \_\_\_\_\_

School student first entered 9<sup>th</sup> grade: \_\_\_\_\_

Date (mm/dd/yyyy) first entered 7<sup>th</sup> grade: \_\_\_\_\_ Date (mm/dd/yyyy) first entered 9<sup>th</sup> grade: \_\_\_\_\_

AD name at previous school (sending school): \_\_\_\_\_

What sport(s) is the student planning on participating in? \_\_\_\_\_

Is this the student's first transfer?  Yes  No

If no, please complete the students high school history since first enrolling in 9<sup>th</sup> grade, starting with the entrance to 9<sup>th</sup> grade:

	Grade	School	Start Date (mm/dd/yyyy)	End Date (mm/dd/yyyy)	Transfer Type
	9				Initial Enrollment 9 <sup>th</sup> Grade
Transfer 1					
Transfer 2					
Transfer 3					

Parent/Guardian Name(s): \_\_\_\_\_ Parent/Guardian Cell (s): \_\_\_\_\_

Are the parents of this student married or divorced?  Married  Divorced

If divorced, who has legal custody? (provide copy of divorce decree) \_\_\_\_\_

*In the event of a court ordered transfer, attach copy of court disposition.*

If married, did both parents move at the time of the transfer?  Yes  No  Other: \_\_\_\_\_

### Family Residence Change

Complete Former Address: \_\_\_\_\_

Former/Sending School: \_\_\_\_\_ District #: \_\_\_\_\_

Did the student move with family?  Yes  No Date of residence change (mm/dd/yyyy): \_\_\_\_\_

**Transfer and Residence changes require supporting documentation to verify a bona fide move, please include the following with this form upon submission (minimum of 2 of the following documents are required).**

- Mailing Address of parent/guardian(s),
- Driver's license or voter registration coinciding with new residence,
- Documentation supporting the sale of your previous home (dual residence is not allowed),
- Purchase agreement of new home or official rental agreement, or
- Any other reliable evidence of residency to support the move.

Has the student repeated a grade since first enrolling in 7<sup>th</sup> grade?  Yes  No

Has the student repeated a grade since first enrolling in 9<sup>th</sup> grade?  Yes  No

Has the student graduated or earned a GED from a previous school?  Yes  No

Does this student have a valid physical on file with the Activities Office?  Yes  No

Is the student fully enrolled in this school as defined by the MN Department of Education?  Yes  No

Has this student participated in more than four seasons in any sport beginning in the 9<sup>th</sup> grade?  Yes  No

Was this student in good standing academically in his/her previous school at departure?  Yes  No

Did this student have any violations in his/her previous school since the start of 9<sup>th</sup> grade?  Yes  No

*If yes, please explain chemical, code of conduct or other:*

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### **Student Eligibility:**

**Transfer students are ineligible to compete at the varsity level at Albert Lea Public Schools for 15 calendar days beginning with the first day the student attends practice in the fall or attends classes at the new school. This student is eligible to return to their previous school without a penalty within this 15 day period. Students may elect to waive this grace period.**

- My child elects to remain ineligible for the 15 day grace period and retains the right to return to the previous school within the grace period.
- My child elects to waive/decline the 15 day grace period in an attempt to become eligible immediately, I waive the right to return to the previous school within the 15 day grace period.

**MSHSL allows for a one time “penalty free” transfer between legally divorced parents with joint custody.**

**Students who open enroll to ALHS will be ineligible for varsity competition for one calendar year.**

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

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

*Eligibility decisions are not final upon completion of this form. Student athletes will need to wait for verification from the MSHSL and ALHS office prior to competing in any varsity competition.*