

~TRANSFER STUDENT APPLICATION~

This form must be ENTIRELY COMPLETED by all students who are transferring to Armstrong High School. No transfer student will be eligible to participate as a member of any varsity team unless he/she has met the period of ineligibility or has met all transfer requirements and has this transfer approved by the Minnesota State High School League office. PLEASE PRINT

First and Last Name: _____

Current Grade in School: _____ Current Age: _____ Date of Birth: _____

School where you entered Grade 7: _____ Date you entered Grade 7(MM/DD/YY): _____

School where you entered Grade 9: _____ Date you entered Grade 9 (MM/DD/YY): _____

First date of attendance at Armstrong High School: _____

List the names and dates of schools you have attended Grades 7-12:

Grade	School Name IMPORTANT! If not in Minnesota, we must have the school's information. Use back side.	Start Date MM/DD/YY	End Date MM/DD/YY
7			
8			
9			
10			
11			
12			

Which activity(s) will you participate in: _____

Which of the conditions of transfer listed below applies to you (CHECK ONE)

(By law 111.00, Transfer and Residence. Several means by which a student can transfer from one school to another.)

- _____ Entering High School for the first time
- _____ Change of residence and occupancy by the student's parents or legal guardian *** See back side ***
- _____ Residence is changed pursuant to a child protection order, placement in a foster home, or a juvenile court disposition order. *** See back side ***
- _____ Open enrollment/ Secondary enrollment options
- _____ Foreign Exchange Student in an approved program VISA TYPE: _____ J-1 _____ F-1
- _____ International Student not in an approved program
- _____ None of the above Explain: _____

Are you under 20 years of age: _____ Yes _____ No

Are you currently enrolled at Armstrong High School: _____ Yes _____ No

Have you played 4 seasons on any varsity team beginning with 9th grade _____ Yes _____ No

If yes identify the sport(s) in which you participated 4 seasons or more _____

Have you received a diploma or GED from any high school in the U.S. or foreign country: _____ Yes _____ No

Have you ever repeated a grade level: _____ Yes _____ No If yes, which grade _____?

Have you received money (played professionally) in a MSHSL-sponsored sport: _____ Yes _____ No

Have you received reduced tuition or a scholarship to attend school: _____ Yes _____ No
If yes, identify the reason for the tuition/scholarship _____

FOREIGN EXCHANGE/INTERNATIONAL STUDENTS: Name of Exchange Program: _____

If you have moved residences at any time from 7th – 12th grade, please write the addresses and the dates (month, day, and year) of residency below. Also indicate the relationship of who you lived with (parents, mother, father, etc.).

Grade	Dates of residence (MM/DD/YY - MM/DD/YY)	Address	Reside with:
7			
		<i>City, state, zip</i>	
8			
		<i>City, state, zip</i>	
9			
		<i>City, state, zip</i>	
10			
		<i>City, state, zip</i>	
11			
		<i>City, state, zip</i>	
12			
		<i>City, state, zip</i>	

Out of state school information:

This information must be provided for the student to participate at a varsity level at Armstrong. In accordance with the Minnesota State High School League, we must contact the previous school and provide the MSHSL with contact and eligibility information.

Name of school: _____

Address: _____ City: _____ State: _____ Zip _____

Phone: _____ Fax: _____

Athletic Director Name: _____ Phone: _____

E-mail: _____ Fax: _____