



## Student Intent to Transfer Certificate

NOTE: This form, or its substantial equivalent, must be completed and a copy maintained at the receiving school for inspection at the request of the OSAA prior to the student's affiliation with the school to which the student is transferring. See Rule 8.6.5, "Transfers to a School with Affiliation" outlined on the back of this document.

Name of Student Brooklyn M Estrada Birth Date 12 / 9 / 99  
Name of Parents and Address of Joint Residence Noelle Pearson Month / Day / Year  
236 NE Treva St  
Hillsboro OR 97124  
School Currently Attending Forest Grove HS City Forest Grove  
School to Which Transferring Glencoe HS City Hillsboro  
Intended Transfer Date 8/17/15

### CERTIFICATION BY PARENT AND STUDENT

Under penalty of perjury, I affirm that no coach, parent, administrator, teacher or other representative of the current school initiated contact or offered any inducements for the purpose of having the student attend the current school for athletic participation. I also affirm that there has been no prior affiliation with the school to which the said student is transferring.

Parent Signature [Signature] Date 8/17/15  
Student Signature Brooklyn Estrada Date 8/17/15

### CERTIFICATION BY ADMINISTRATOR OF SCHOOL CURRENTLY ATTENDING

I affirm that I am aware of the above student's intent to transfer and the specifics of that transfer stated above.

Signature [Signature] Date 8/18/15  
Administrator

### CERTIFICATION BY ADMINISTRATOR OF SCHOOL TO WHICH TRANSFERRING

I affirm that I am aware of the above student's intent to transfer and the specifics of that transfer stated above. I also affirm that there has been no affiliation, as stated in OSAA Rule 8.6.5, prior to the signing of this certificate by all parties above.

Signature [Signature] Date 8/17/15  
Administrator



## Eligible Student Transfer Certificate

**NOTE: This form must be completed and a copy maintained at the school for inspection at the request of the OSAA prior to participation by the student listed below in any interscholastic contest.**

Name of School Glencoe High School City Hillsboro

Name of Student Booklyn Estrada Birth Date 12 / 9 / 99  
Month / Day / Year

Name of parents and address of joint residence Noelle Pearson  
236 NE Treena St  
Hillsboro OR 97124

Student's Place of Birth Portland Student's Age 15

### ACADEMIC HISTORY

Date of first enrollment in high school or registration in home school Sept 2014

If home school student, date and score of last test —

School from which transferring Forest Grove Dates Attended 9/2014 - 6/2015

Last date that student attended classes, games or practices at school from which transferring 6/2015

If transferring between school districts under teams of a Reciprocal Transfer Agreement, mark here: —

Attach documentation to support the fact that the transfer has been approved by both the sending and receiving school districts.

Date(s) of enrollment and name(s) of any other high school(s) attended:

Freshman Year 9/2014 - 6/2015

Sophomore Year —

Junior Year —

Senior Year —

Does the student satisfy the OSAA academic eligibility requirements (Rule 8.1) by:

Being enrolled full time during the last grading period? YES NO (Circle One)

Attending regularly during the last grading period? YES NO (Circle One)

### CERTIFICATION BY SUPERINTENDENT OR PRINCIPAL

I certify that I have investigated the data herein contained and, to the best of my knowledge and belief, this student is eligible under OSAA rules.

Signature [Signature] 8.19.15  
Superintendent or Principal Date

### CERTIFICATION BY PARENT

Under penalty of perjury, I affirm that no coach, parent, administrator, teacher or other representative of the current school initiated contact or offered any inducements for the purpose of having the student attend the current school for athletic participation.

Signature [Signature] 8-18-15  
Parent Date