



Oregon School Activities Association

25200 SW Parkway Avenue, Suite 1

Wilsonville, OR 97070

503.682.6722 fax: 503.682.0960 <http://www.osaa.org>



Affirmation Statement

Under penalty of perjury, I do 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. Further, I authorize release of permanent school records to the Oregon School Activities Association.

This statement is attached to the online Student Eligibility Request Form with ID #

20150515

Online Form ID Number (8 digits)

Both signatures required for all Eligibility Requests.

Scott Rucker

Printed name of Parent (Host family if Non-CSIET student)

Scott Rucker

Signature

11-3-15

Date

Ryan Thompson

Printed name of Principal / Superintendent

Ryan Thompson

Signature

11-3-15

Date

How to Attach This Form to an Online Student Eligibility Request Form

You must upload and attach this completed and signed Affirmation Statement form. Follow these steps to attach this form to your online eligibility request form.

1. Print a copy of this blank form.
2. Fill out the form on paper:
 - a. Write in the 8-digit eligibility form identification number (located at the top of your online form.)
 - b. Have each party read the affirmation statement and then sign and date the form.
3. Scan the completed form to an electronic PDF file.
4. Upload the electronic file to your form.
 - a. Edit your online eligibility form and scroll to the "Waiver Files" section.
 - b. Click the "Upload a File" button.
 - c. Select the file type as "Affirmation Statement Signature Form."
 - d. Browse to the scanned file's location saved to your computer and select the corresponding file for upload.
 - e. Click the "Upload" button.

If successful, your form will show a link to the uploaded file and note that it has been uploaded.

Student Name Rucker, Caleb John			
Student ID 121315	SSN 544-55-8611	Grade 10	Gender M
Date of Birth 09/17/1999	Birth Place Medford OR		
Student Mailing Address Rucker, Sherie 1891 SW Meadow Glen Grants Pass, OR 97527 541-659-8513			

Grants Pass High School Academic Transcript

Enter Date: 09/11/2015
Leave Date: 06/16/2016



Class of: 2018
Rank: 113 of 442

School Name/Address

Grants Pass High School
830 N.E. 9th Street
Grants Pass, OR 97526

Tel: 541-474-5710 Fax: 474-5717

Counselor: HHAYES

John Higgins, Superintendent

Type	Course	Crs#	Term				Abs Credit	Type	Course	Crs#	Term				Abs Credit	Academic GPA	Credit History		
			1	2	3	4					Grade	1	2	3	4				
14-15 Grants Pass High School																			
ART	9 Computer Applications	10004	A				2	0.500									09: 3.286	7.000	7.000
ART	9 Video Productions I	11051		B			5	0.500									10: 0.000	0.000	0.000
ART	9 Manufacturing I	17006	A				2	0.500									11: 0.000	0.000	0.000
ART	9 Adventures With Food	22202	A				3	0.500									12: 0.000	0.000	0.000
ENG	9 Freshman English	01001	B	A			5	1.000									Total Cumulative GPA: 3.286		
HEA	9 Emergency Care	08055		A			0	0.500									Essential Skills		
MAT	9 Algebra I	02052	C	C			4	1.000									Math have not been met		
PE	9 Introduction to Physical Education	08001	A				3	0.500									Reading have not been met		
PE	9 Weight Training / Conditioning	08009		A			1	0.500									Writing have not been met		
SCI	9 The Physical World	03159	C	C			3	1.000											
WEL	9 Wellness	08051		A			5	0.500											