



Oregon School Activities Association  
25200 SW Parkway Avenue, Suite 1, Wilsonville, OR 97070  
503.682.6722 FAX 503.682.0960 www.osaa.org

## Eligibility Request Form

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3.f

1. Complete all steps on front and back of this form.
2. Attach copy of student's official transcripts with this form.
3. Requests with incomplete enrollment records will not be considered.
4. Allow five working days to process.

OSAA Eligibility ID #

### STEP 1

#### Student Information

School: ELMIRA HIGH SCHOOL School Phone: (541) 935-8200  
Student: (Last) LECOE (First) JOSEPH (Middle) NATHANIEL  
Date of Birth: 5/23/2000 Age: 15  
Parent: JOSEPH LECOE  
Address: ALASKA  
Person with whom student lives: Currently: DOMINOU STEWART Last Year: JOE LECOE  
Relationship to student: ALMT FATHER  
Address where student lives: 40 ALASKA STREET, EUGENE OR 97402

### STEP 2

#### Type of Waiver

#### A. SEND DIRECTLY TO OSAA (see checklist in Step 4)

- ☐ Age Rule 8.3
- ☐ Fifth Year Rule 8.2
- ☐ Grade Deficiency Rule 8.13
- ☐ Satisfactory Progress Toward Graduation Rule 8.12
- ☐ All Non-CSIET Foreign Students – Must also meet CSIET criteria in Rule 8.6.3(c)
- ☐ All CSIET Foreign Students not meeting criteria in Rule 8.6.3(c)

#### B. SEND DIRECTLY TO DISTRICT COMMITTEE

- ☐ Transfers without change of Joint Residence Rule 8.6 (including transfers where the student also has a Grade Deficiency and / or is not making Satisfactory Progress Toward Graduation).
- ☐ Transfers to a school with affiliation Rule 8.6.5

### STEP 3

#### Enrollment Record

Fill In All Sections

Has an Individualized Educational Program (IEP) been created for this student? ☐ Yes ☐ No

If yes, is the student meeting the requirements of the Individualized Educational Program (IEP)? ☐ Yes ☐ No

Grading Period	Date Attended	School Attended	# Credits Earned	# Classes Passed
<b>Example</b> → → → → → → → →	9/5/99 to 1/12/00	Oregon High School	3.0	6
9 <sup>th</sup> – 1 <sup>st</sup> semester/trimester	9/07/14 to 3/01/15	CROWN HIGHT SCHOOL	3.5	7
9 <sup>th</sup> – 2 <sup>nd</sup> semester/trimester	3/01/15 to 06/15/15	ELMIRA HIGH SCHOOL	3.5	7
9 <sup>th</sup> – 3 <sup>rd</sup> trimester	__/__/__ to __/__/__			
10 <sup>th</sup> – 1 <sup>st</sup> semester/trimester	__/__/__ to __/__/__			
10 <sup>th</sup> – 2 <sup>nd</sup> semester/trimester	__/__/__ to __/__/__			
10 <sup>th</sup> – 3 <sup>rd</sup> trimester	__/__/__ to __/__/__			
11 <sup>th</sup> – 1 <sup>st</sup> semester/trimester	__/__/__ to __/__/__			
11 <sup>th</sup> – 2 <sup>nd</sup> semester/trimester	__/__/__ to __/__/__			
11 <sup>th</sup> – 3 <sup>rd</sup> trimester	__/__/__ to __/__/__			
12 <sup>th</sup> – 1 <sup>st</sup> semester/trimester	__/__/__ to __/__/__			
12 <sup>th</sup> – 2 <sup>nd</sup> semester/trimester	__/__/__ to __/__/__			
12 <sup>th</sup> – 3 <sup>rd</sup> trimester	__/__/__ to __/__/__			

#### STEP 4 Letter From Previous School Principal (Transfers only)

A letter from the principal of the school previously attended is **required**. Letter may refer to high school activities previous participated in, whether student was in good standing at the time of transfer, any outstanding fees / lost materials, etc.

#### STEP 5 Eligibility Hardship Checklist

Prior to OSAA consideration of eligibility, this Eligibility Request Form and the following information must be received by the OSAA Executive Director.

##### Transcripts

Current high school  
Previous high schools

##### School Records

Attendance records  
Letter authorizing release of school records to OSAA

##### Letters of Explanation

Student  
Parents or Legal Guardian  
School Representative  
*Optional* – Other letters as relevant.

##### Age & Fifth Year Additional Documentation

Gap in student's academic process  
Credit deficiency  
Classes needed to graduate  
Individualized Educational Program (IEP)  
Student's disability as defined by ADA

#### STEP 6 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 OSAA.

Both signatures required for all Eligibility Requests.

Signature of Parent (Host Family if Non-CSIET student)

Signature of Principal / Superintendent

(Principal/Superintendent is encouraged to attach any specific comments regarding this student's eligibility request.)

#### STEP 7 OSAA / District Committee Authorization Decision

The District Committee should forward copies of all District Committee decisions and rationale for that decision to the OSAA.

Director's / Chairperson's Signature: \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Chairperson's School: \_\_\_\_\_

Comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

☐ Approved

☐ Denied

#### STEP 8 Appeals Process

**DISTRICT COMMITTEE DECISIONS:** Appeals of District Committee decisions will be heard by the OSAA Eligibility Appeals Board. If denied by the OSAA Eligibility Appeals Board, an appeal may be made to a Hearings Officer under **Rule 9, "Hearings Officer"**. Appeals to the Hearings Officer shall include an appeal fee of \$200.

**OSAA EXECUTIVE DIRECTOR DECISIONS:** Appeals of OSAA Executive Director decisions regarding age, fifth year, grade deficiency, and non-CSIET foreign students are heard by the OSAA Executive Board. If denied by the OSAA Executive Board, an appeal may be made to a Hearings Officer under **Rule 9, "Hearings Officer"**. Appeals to the Hearings Officer shall include an appeal fee of \$200.

**ELIGIBILITY APPEAL FILING FEE:** "Any party filing an appeal of a decision by the District Athletic Committee to the Eligibility Appeals Board or a decision of the Executive Director to the Executive Board shall be assessed a filing fee of \$100 to defray the costs to the Association of assembling the respective appeals bodies to hear the appeal." (Excerpt OSAA Handbook, **Executive Board Policies, "Eligibility Appeal Filing Fee"**)