



Oregon School Activities Association
25200 SW Parkway Avenue, Suite 1
Wilsonville, OR 97070

503.682.6722

www.osaa.org

Student Eligibility Request Form

Form ID Number
20150661

Type of Waiver

Transfer without Change of Joint Residence Handship Appeal
OSAA Rule 8.6 - Send directly to District Athletic Committee

Submitted 12/15/2015
2015-16 School Year

Sheldon High School Information

2455 Willakenzie Rd
Eugene, OR 97401
(541) 790-6600

Robert Bolden, Principal
boldenr@4jlane.edu
(541) 790-6600

Matt Binkerd, Athletic Director
binkerd_m@4jlane.edu
(541) 790-6650

Student Information

Zachary L Tisher

DOB: 5/9/2001

Age: 14 years 7 months (as of 12/15/15)

Current Address

Lisa Gibson
Parent (Mother/Father)
33666 McKenzie View Dr.
Eugene, OR 97408

Last Year's Address

Lisa Gibson
Parent (Mother/Father)
15616 Flintridge Dr
Los Gatos, CA 95032

lgibs@yahoo.com
(408) 458-0173
Lives only with Mother

lgibs@yahoo.com
(408) 458-0173
Lives only with Mother

Attends: Sheldon High School
Previous: Churchill High School

Grade: 9

Has IEP? No

Meeting IEP? N/A

Enrollment Record

| SY | GR Period | Dates | School | # Credits Earned | # Classes Passed |
|---------|----------------|-------------------|-----------------------|------------------|------------------|
| 2015-16 | 9 1st Semester | 9/1/15 to 12/3/15 | Churchill High School | 3 | 6 |

Information 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.

Both signatures are required.

Parent Signature (or host family) _____

Principal / Superintendent _____

Instructions

Ensure the Affirmation Statement section has both signatures. Send this printed Student Eligibility Request Form and any attached files to your District Athletic Committee. Do not send this to the OSA office. Keep a copy for your school's records. Allow five business days for your request to be processed. Once a decision is made, the District Athletic Committee will notify your school.

Send a printed version of this form directly to your District Athletic Committee with any other printed attachments.

District Athletic Committee Decision

This section is to be filled out by the District Athletic Committee. Once a decision has been made, the committee shall contact the school regarding the outcome and forward a copy of this completed form and any supplemental materials to the OSA office.

MAIT Blumeyer
Chairperson's Name (print) _____

Date 12-17-15

MAIT Blumeyer
Chairperson's Signature _____

☒ Approved
☐ Denied

Sheldon / A.O.
Chairperson's School & Position _____

Notes:

SE, and S.M. approved this Sheldon

request.

Appeals Process

Appeals of the Athletic Committee by the District Athletic Committee are heard by the OSA Eligibility Appeals Board. Appeals must be requested in writing, in a trial, and submitted to the OSA Executive Director.