

2014-15 WIAA SCHOOL ELIGIBILITY CHECKLIST (To be completed by Athletic Director)

Student Name _____ **Activity(ies)** _____

Coach(es) _____ **Date Appellant Notified Ineligible** _____

Year of Eligibility 1 2 3 4 5

This checklist is designed for use by school personnel responsible for reviewing and verifying WIAA eligibility requirements. The checklist does NOT include criteria or standards established by individual schools or districts.

Regulation	Standard	Yes	No	Comment or Question
Physical Exam passed and filed 17.11.0	The physical examination shall be valid for twenty-four (24) consecutive months to the date unless otherwise limited by local school district policy or when the physician indicates the physical is only good for less than twenty-four (24) consecutive months.			
Age _____ 18.4.0 Birthdate _____	<u>Fall</u> <u>Winter</u> <u>Spring</u> HS under 20 Sept. 1 Dec. 1 Mar. 1 JH under 16 June 1 MS under 15 June 1			
Regular member of member school. 18.5.0	Enrolled half-time or more, exclusive of interscholastic athletic activities. Enrollment date _____			
Scholarship 18.7.0	Maintain passing grades in a minimum of: 3 classes in a 4 period class schedule or the equivalent credits 4 classes in a 5 period class schedule or the equivalent credits 5 classes in a 6 period class schedule or the equivalent credits 6 classes in a 7 period class schedule or the equivalent credits 7 classes in an 8 period class schedule or the equivalent credits RUNNING START COURSES EQUIVALENT One- 5credit quarter course One high school credit One-3 credit semester course One high school credit			
18.7.1	Seniors on track to graduate may enroll in one less class than the minimum number of classes required for other students. They must maintain passing grades and cannot drop or withdraw from a class to remain eligible.			
Previous Semester 18.8.0	Student has met criteria for a previous semester/trimester.			
Regular Attendance 18.9.0	Student enrolled and in regular attendance the first 15 days of current semester (10 days for trimester).			
Residence 18.10.0	Student resides with parent(s) in this school district and school service area. A school district may be public or private and a private school district shall be considered separate and distinct from a public school district.			
Transferring Students 18.11.0	In order to be eligible for varsity competition, transferring students must meet the transferring student requirements of 18.11.1, 18.11.2, 18.11.3, or be granted a waiver under 18.13.0 and 18.25.0.			
Season Limitations 18.14.0	After entering or being eligible to enter the ninth grade, a student shall have four (4) consecutive years of interscholastic eligibility.			
Sports Participation 18.25.3A	A transferring student has not participated at the school level or club/community equivalent in that sport for one (1) year prior to his/her transfer.			

2014-15 FORM CHECKLIST

Student's Name

Current School

Date Enrolled

Date Appellant Notified Ineligible

You have received this packet of information because you have been declared ineligible according to WIAA Rules and Regulations. The attached forms are to be completed and faxed or mailed to the WIAA District Eligibility Chairperson within the time limits stated on Form 1, and include all support documentation as listed below.

FORMS		TO BE COMPLETED BY	MANDATORY FOR
Form 1	Notice of Ineligibility – School Report	School Principal/Athletic Director	All Appellants
Form 2	Student Notification Preference	Student	All Appellants
Form 3	Student Information/Statement	School Principal/Athletic Director	All Appellants
Form 4	Parent/Guardian Statement	Parent/Guardian	All Appellants
Form 5, Part 1	Previous School Statement	School Principal/Athletic Director	Transferring Appellants
Form 5, Part 2	Current School Statement	Previous/Current School Administrator	All Appellants
Form 6	Graduation Plan	School Principal/Counselor	Season Limitation Appellants
Appendix 1	Educational/Cultural Exchange	School Principal/Athletic Director	All Exchange Appellants
*Appendix 1 form must be submitted to the school's designated eligibility chairperson. Form can be found at the WIAA website.			

ATTACHMENTS**INSTRUCTIONS****MANDATORY FOR**

Complete/Current Transcript

Must Be Attached With Appeal Forms

All Appellants

Other Supporting Documents

May Be Included With Appeal Forms

All Appellants

2014-15 Student Eligibility Packet

FORM 1: NOTICE OF INELIGIBILITY AND REQUEST FOR HEARING (TO BE COMPLETED BY STUDENT)

Print Appellant Name

Name of School

Appellant's Age **Appellant's Date of Birth**

School District

Current Home Address **Apt #**

Year in School 9 10 11 12

City **Zip + 4**

Please indicate the WIAA activity(ies) that you anticipate participating in and/or continue to participate in:

Parent(s) Name

FALL: _____

WINTER: _____

Parent(s) Home Address (if different from above)

SPRING: _____

The undersigned has reasonable cause to believe that you are presently ineligible to participate in some or all interscholastic activities under the rules of the Washington Interscholastic Activities Association. The relevant WIAA rules are checked below:

- | | | |
|---|---|--|
| <input type="checkbox"/> Age Limitation – Article 18.4 | <input type="checkbox"/> Student Member – Article 18.5 | <input type="checkbox"/> Scholarship – Article 18.7 |
| <input type="checkbox"/> Previous Semester – Article 18.8 | <input type="checkbox"/> Transfer – Article 18.10/11/13 | <input type="checkbox"/> Season Limitations – Article 18.14* |
| <input type="checkbox"/> Other (Explain) _____ | | |

***NOTE: Fifth year appellants must provide a written graduation plan (Form 6 in packet) signed by a school official, a complete transcript, current school progress report, and attendance record and/or current class schedule.**

Date Appellant notified of Ineligibility: _____ **Who Notified Appellant:** _____

Have you ever had an athletic appeal before? Yes No **Date of Appeal:** _____

Indicate reason for prior appeal: _____

CERTIFICATION BY PRINCIPAL/ATHLETIC DIRECTOR:

Prior to sending the Student Eligibility Packet to the District Eligibility Chairperson, I certify that I have inspected the data and that all appropriate forms have been completed and included by the student, parent(s), and/or myself.

Please Print Name and Title

Principal/Athletic Director's Phone Number

Signature of Principal/Athletic Director **Date**

CERTIFICATION BY APPELLANT AND PARENT/GUARDIAN:

I certify that I have inspected the data herein contained in the Student Eligibility Packet and, to the best of my knowledge and belief, all information provided by me/us is complete and accurate.

Please Print Appellant's Name

Please Print Parent(s)/Guardian(s) Name

Signature of Appellant **Date**

Signature of Parent(s) **Date**

TO BE COMPLETED BY STUDENT: **ONLY SELECT ONE (1) OF THE THREE (3) OPTIONS BELOW:**

Please note if more than one checkbox is selected, all options selected will be disregarded and notification will only be sent to your Athletic Director.

This form will allow you, the student, to select how you would prefer to be notified of the District Eligibility Committees decision of your interscholastic eligibility status. Please seek assistance from your current high school athletic director and/or the WIAA

SCHOOL'S ATHLETIC DIRECTOR

The District Chairperson will email the current school's Athletic Director within five (5) school business days with the copy of the written decision. Should they not receive an email within the five (5) school business days, it is your responsibility to contact the eligibility chairperson to determine why an email was not received.

Email Address

CURRENT HOME MAILING ADDRESS

A copy of the written decision will be sent by certified mail within five (5) school business days. Please understand that if you are not home to sign/receive the letter it is your responsibility to go and retrieve the letter from your local post office. The first delivery date post marked on the letter will begin your ten (10) school business days to appeal to the WIAA Executive Director.

Address

Apt #

City

Zip+4

PRIMARY EMAIL ADDRESS

The District Chairperson will email you within five (5) school business days with the copy of the written decision. Should you not receive an email within the five (5) school business days, it is your responsibility to contact the eligibility chairperson to determine why an email was not received.

Email Address

Print Appellant's Name

Signature of Appellant

Date

FORM 3: 2014-15 STUDENT INFORMATION/PERSONAL STATEMENT

Name of Appellant Date of Birth

Date Appellant notified of Ineligibility: _____ Who Notified Appellant: _____

Person(s) with whom Appellant resides _____ School district in which Appellant resides _____

Is person(s) listed above a legal guardian: Yes No If you selected NO please fill out the box below.

Indicate relationship of Appellant to person(s) with whom he/she resides: _____

Has legal guardian been court appointed? Yes No Date appointed _____

Submit certified copy of court order or letter of guardianship: _____
Date

Is support from parent(s) continuing to Appellant? Yes No

If residing with guardian other than parent(s), please indicate the number of months: _____ and Date: _____

Address of person(s) with whom Appellant resides _____

The following is my statement as to why, under the rules of the WIAA, I should be eligible for interscholastic competition. State in detail what hardship condition, as defined below, prevented student from complying with WIAA rules.

A hardship exists only when some unique circumstances concerning the student's physical or emotional status exist and only when such circumstances are not the result of acts or actions by the student or family unit. Usual maturation problems or family situations that do not cause severe and abnormal emotional problems and academic or athletic deficiencies in a school's curriculum or extracurricular activities do not constitute a hardship. In addition, the WIAA has the ability to waive rules applicable to granting additional playing time and granting such is discretionary based on the individual facts and circumstances of each student.

If additional space is required, please attach and number any additional page(s). Please attach any documentation (e.g., transcript, medical reports, financial reports, police and court records or other materials) that supports the position of the petitioner.

ALL LETTERS SUBMITTED MUST BE DATED AND SIGNED.

WIAA Guideline states "...the participant/parent/guardian provided the school with false information which caused the school to declare the participant eligible. In such cases, the participant will be declared ineligible for interscholastic competition for a period of one (1) year. The one (1) year penalty begins the day the determination is made that false information had been provided. The one (1) year penalty may be appealed to the WIAA Executive Director.

Signature of Appellant Date

TO BE COMPLETED BY PARENT/GUARDIAN/FAMILY MEMBER WITH WHOM APPELLANT RESIDES

Name of Parent(s)		Phone	Cell
Address	Apt #	City	Zip+4
Parent E-mail Address		Parent Fax #	

It is my (our) request that my (our) son/daughter be eligible for interscholastic sports activities. It is my (our) understanding that this statement will become a part of the material presented to the Eligibility Committee to determine whether he/she will be eligible for interscholastic sports activities.

The following is my (our) statement as to why, under the rules of the WIAA, my (our) son/daughter should be eligible for interscholastic competition. State in detail what hardship condition, as defined below, prevented student from complying with WIAA rules.

A hardship exists only when some unique circumstances concerning the student’s physical or emotional status exist and only when such circumstances are not the result of acts or actions by the student or family unit. Usual maturation problems or family situations that do not cause severe and abnormal emotional problems and academic or athletic deficiencies in a school’s curriculum or extracurricular activities do not constitute a hardship.

In addition, the WIAA has the ability to waive rules applicable to granting additional playing time and granting such is discretionary based on the individual facts and circumstances of each student.

Please attach any documentation (e.g., transcript, medical reports, financial reports, police and court records or other materials) that supports the position of the petitioner. ALL LETTERS SUBMITTED MUST BE DATED AND SIGNED.

WIAA Guideline states “...the participant/parent/guardian provided the school with false information which caused the school to declare the participant eligible. In such cases, the participant will be declared ineligible for interscholastic competition for a period of one (1) year. The one (1) year penalty begins the day the determination is made that false information had been provided. The one (1) year penalty may be appealed to the WIAA Executive Director.

Signature of Parent/Guardian/Family Member

Date

**FORM 5, PART 1: 2014-15 PREVIOUS SCHOOL STATEMENT
TO BE FILLED OUT BY PRINCIPAL/ATHLETIC DIRECTOR OF PREVIOUS SCHOOL**

Name of Student Requesting Eligibility

Current School

WIAA District #

THIS IS NOTIFICATION THAT A FORMER STUDENT AT YOUR SCHOOL WILL BE PETITIONING FOR AN ELIGIBILITY APPEAL HEARING. PLEASE SEND THIS FORM TO THE STUDENT'S CURRENT SCHOOL ATHLETIC DIRECTOR, AND TO THE APPLICABLE ELIGIBILITY CHAIR.

STEP ONE:

Previous School

Name of Principal/Athletic Director

Student's Last Date of Attendance

STEP TWO:

MANDATORY FOR REPLACEMENT YEAR/TRANSFER: STUDENT'S PREVIOUS PARTICIPATION IN ALL SPORTS FOR THE FOLLOWING GRADE LEVELS:

Sport	School	School Year	*Name of the Community/Club Sport
8 th	_____	_____	_____
9 th	_____	_____	_____
10 th	_____	_____	_____
11 th	_____	_____	_____
12 th	_____	_____	_____

It is my understanding that this statement will become part of the material presented to the Eligibility Committee concerning eligibility in interscholastic sports activities. This is my statement relative to the above-named student's request.

STEP THREE:

Are there any conditions of ineligibility that apply to this student (e.g., athletic code violations, school suspensions, scholastic, athletic transfers, or any other condition(s) the eligibility committee should be aware of prior to the district eligibility hearing, etc.)?

- No**, please sign and date.
- Yes**, please submit a statement on your schools letterhead, signed and dated. Statements need to be submitted to the applicable Eligibility Chair and the receiving school's principal/athletic director.
- Yes**, I would like to attend the eligibility appeal hearing for this student.

District	Eligibility Chairperson	Email	Fax
District One:	Paul Lesh	nw1elig@frontier.com	425-486-2053
District Two:	Sam Jackson	sophsamjackson@gmail.com	425-402-9147
District Three:	Tom Reardon	reardonwcd@comcast.net	253-276-0018
District Four:	Don Farler	don.farler@tumwater.k12.wa.us	Not Available
District Five:	Ric Palmer	rpalmer@bickleton.wednet.edu	509-896-2071
District Six:	Scott Brown	sbrown@cashmere.wednet.edu	509-782-2891
District Seven:	Wayne McKnight	wwmcknight@hotmail.com	509-926-4107
District Eight:	Herb Rotchford	herbertr@spokaneschools.org	509-354-5965
District Nine:	Stephanie Wooderchak	swooderchak@waitsburgsd.org	509-377-6551

Signature of Principal/Athletic Director at Previous School

Date

**FORM 5, PART 2: 2014-15 PREVIOUS AND CURRENT APPELLANT PARTICIPATION
TO BE FILLED OUT BY APPELLANT/FAMILY
Mandatory for Replacement Year/Transfer**

Name of Appellant Requesting Eligibility

Date Appellant notified of Ineligibility

Who Notified Appellant of Ineligibility

Current School

WIAA District #

STEP ONE:

Date of Enrollment: _____

Student's athletic history and current participation:

	Sport (s)	School (New)	School Year	*Name of the Community/Club Sport
8 th	_____	_____	_____	_____
9 th	_____	_____	_____	_____
10 th	_____	_____	_____	_____
11 th	_____	_____	_____	_____
12 th	_____	_____	_____	_____

STEP TWO:

It is my understanding that this statement will become part of the material presented to the Eligibility Committee concerning eligibility in interscholastic sports activities. This is my statement relative to the above-named student's request.

WIAA Guideline states "...the participant/parent/guardian provided the school with false information which caused the school to declare the participant eligible. In such cases, the participant will be declared ineligible for interscholastic competition for a period of one (1) year. The one (1) year penalty begins the day the determination is made that false information had been provided. The one (1) year penalty may be appealed to the WIAA Executive Director.

Signature of Principal/Athletic Director at Current School

Signature of Student Verifying Participation

Title

Please Print Name

Date

Date

***COMMUNITY/CLUB SPORT: PARTICIPATION IN TEN (10) OR MORE COACH ORGANIZED (OR LED) PRACTICES OR ONE (1) CONTEST AT THE SCHOOL, CLUB/COMMUNITY EQUIVALENT.**

**FORM 6: 2014-15 GRADUATION PLAN
(ONLY FOR SEASON LIMITATION APPELLANTS)**
REQUIRED BY THE ELIGIBILITY COMMITTEE

Name of Student Requesting Eligibility

Current School

School District

Total of Credits Required by School for Graduation

Credits Student Has Earned to this Date

Credits Needed for Student to Graduate

Expected Graduation Date: month/date/year

School Organization: Trimester Semester Block Schedule

List specific classes/credits student needs to graduate. If more space is needed please attach to this form.

Class

Credit Value

(Total Credits the Student is Currently Enrolled In)

Plan Monitored By: _____

Title: _____ **Telephone:** _____

Monitor's E-Mail Address: _____

Date Student Will Complete Requirements: _____

Signature of Academic Counselor/Principal

Date

Signature of Athletic Director

Date

Signature of Appellant

Date

APPELLANT MUST ATTACH: a complete and current school progress report, attendance and/or current class schedule.