STUDENT-ATHLETE RESIDENCY AFFIDAVIT

NJSIAA STUDENT-ATHLETE RESIDENCY AFFIDAVIT

Print Student Full Name

I, ______, of full age, being duly sworn to law, upon my oath depose and say:

- 1. I am the parent/legal guardian of the above listed student.
- I currently reside at ______
 I have resided at the above address since: _______

3. The above-named student moved with me at my new address on ______

- 4. Prior to moving to the new residence address listed above, I resided at the following address: _____
- 5. I hereby authorize the New Jersey State Interscholastic Athletic Association ("NJSIAA") to investigate and confirm any and all Statements made by me in this affidavit. I agree to provide any additional information that may be requested by the NJSIAA.
- 6. I will notify the present school immediately, in writing, if any of the conditions recited herein are changed.
- 7. This residence may not be associated with, leased, or provided by anyone associated with the school or acting at the direction of the school, including but not limited to administration, staff, coaches, students, parents, booster clubs, or any organization having a connection with the school.

I hereby certify that the forgoing statements are true, and I am aware that if any of the foregoing statements are willfully false, I am subject to punishment.

Parent/Guardian Signature

Print Parent/Guardian Full Name

STATE OF N COUNTY OF			
		d hefore me	
on the	day of	, 20	_, and I made known to him/her the contents of ubscribed to by said affiant before me on this date.
NOTARY PUBL	IC		

Copies of this Affidavit will be sent to the New Jersey State Interscholastic Athletic Association upon request.

NEW JERSEY STATE INTERSCHOLASTIC ATHLETIC ASSOCIATION - TRANSFER FORM							
The undersigned hereby certify that the student named herein has transferred to his/her present school of Enrollment without inducement or recruitment or to seek an athletic advantage. The parents/guardians also agree to the submission to the NJSIAA of any pertinent records, including transcripts, maintained by the schools. Refusal to sign the transfer form may not be based upon nonpayment of fees, failure to return school property and the like. The transfer form is necessary for students who are residing with their parents who have moved to the United States or who have moved from one secondary school district to another secondary school district.							
STEP 1 – TO BE COMPLETED BY PRESENT SCHOOL AND FORWARDED TO PREVIOUS SCHOOL (PLEASE PRINT LEGIBLY)							
Name of Present Schoo	EASTERN REGIONAL H	S City: VOORHEES	— — — — — — — — — Not choice School? — Not choice				
Student's Name:	,	Student's Date of Birth:					
Date of Enrollment at Present School (If Enrollment occurs after the beginning of the school year, Month, Day, Year, student first attended class):							
Check box that applies: 🛛 Evidence that the student transferred for athletic advantage. 🖓 Evidence that student was recruited.							
IF EITHER BOX IS CHECKED, WRITTEN EVIDENCE OF SUCH MUST BE SENT <u>DIRECTLY</u> TO NJSIAA FOR REVIEW.							
Principal's Name:	DR. ROBERT M. TULL, JR.	Principal's Signature:	Date:				
Athletic Director's Nam	e: MR. STEVEN PICOT	Athletic Director's Signature:	Date:				
Student's Name:		Student's Signature:	Date:				
Parent/Guardian Name	:	Parent/Guardian Signature:	Date:				
Parent/Guardian PRESENT complete Address:							

PLEASE COMPLETE AND RETURN BOTH PAGES TO:

ATHLETIC OFFICE Kristi Hunter-Ryan khunter@eccrsd.us