**hRockingham County Schools**

**Athletic Transfer Eligibility Rules**

**Transfer within Rockingham County**

**After initial entry into the ninth grade, or absent a bona fide move as provided in the Residence Section of the NCHSAA Handbook:**

**A student transferring from one high school to another high school within Rockingham County must sit out 365 days for athletic participation without receiving a hardship waiver from the Hardship Committee.**

**HARDSHIP WAIVER REQUEST FORM**

**Student Name:**

**Parent Name:**

**Address where the parent and student resides:**

**City State Zip Code**

**Phone: Cell Phone:**

**School Attended 2021-2022 Grade**

**School Attending 2022-2023 Grade**

**Basis (es) for Request to Waive 365 Day Ineligibility Rule**

**Please check one or more of the following:**

**\_\_\_\_\_Special Curricular Needs**

A student is unable to obtain in his or her regularly assigned school those specially needed courses of study or programs necessary to pursue specialized educational or career goals. Proper documentation must be submitted to establish this basis. NOTE: This basis requires the showing or more than just a different class, it must be course of study or program that is not offered at the regularly assigned school.

**\_\_\_\_\_Documented Medical Needs**

A student provides documentation provided by a physical(or comparable professional provided such as a psychologist, etc.) containing a detailed professional opinion that the

Page 2: Student Name:

student’s mental, emotional or physical health would be adversely affected by the student’s attendance at his or her regularly assigned school.

\_\_\_\_\_**Student’s parent/legal custodian is a permanently assigned employee of Rockingham County Schools**

A student provides documentation establishing (a) his or her parent/legal custodian is a permanently assigned employee of Rockingham County Schools. NOTE: This basis requires the showing that the parent/legal custodian is a permanently assigned employee, not in temporary, volunteer or lay coach.

\_\_\_\_\_**Family/Student Child Care Needs**

The family or student provides documented child care needs that necessitate a transfer to avoid a serious and continuing hardship.

**\_\_\_\_\_Documented Safety Issues**

A student provides documentation of an unsafe environment at his or her school (e.g., physical or emotional violence/threats make continued attendance at his or her school unsafe, etc.).

**\_\_\_\_\_Federal or State Mandated Transfer**

A student provides documentation of a transfer made pursuant to the Unsafe School Choice or School Improvement Choice Transfer under the No Child Left Behind Act, the Transfer of Homeless Students as provided in 42 U.S.C. 11431 et. seq., or any other applicable federal or state law allowing a similar right to transfer (including North Carolina or federal court orders).

**\_\_\_\_\_Other Serious and Continuing Hardship**

The student provides documentation establishing a serious and continuing hardship which cannot reasonably be eliminated or reduced by means other than a transfer from his or her regularly assigned school.

The default is that, absent a bona fide move, transferring students from one school to another school in Rockingham County will be ineligible to participate in athletics for 365 days from the student’s enrollment in the Receiving School. In order to receive a waiver of the rule, the Receiving School bears the burden of establishing (1) the existence of one or more of the basis (es) listed above; and (2) that the transfer was not done for athletic purposes.

Page 3: Student Name:

Statement of Information

This Statement of Information must be submitted as part of a Receiving School’s request to waive the default eligibility waiting period (365 days) as provided in the NCHSAA’s transfer rule. The purpose of this Statement is to allow both schools to offer their positions regarding whether this transfer has been done for athletic purposes.

Receiving School:

(School to which student is transferring)

Principal’s Signature:

Principal Name:

Email and Phone Number:

After reviewing the facts and circumstances regarding the transfer of the above-referenced student, including discussing this matter with the athletic director, coaches and parents, my position is that (initial one):

\_\_\_\_\_ This transfer WAS NOT done for athletic purposes.

\_\_\_\_\_ This transfer WAS done for athletic purposes. NOTE: If you believe the transfer was done for athletic purposes you should not continue this waiver process and submit this report to Rockingham Co. Schools Athletic Director.

Previous School:

(School from which student is transferring)

Principal’s Signature:

Principal Name:

Email and Phone Number:

After reviewing the facts and circumstances regarding the transfer of the above-referenced student, including discussing this matter with my athletic director and coaches, my position is that (initial one);

Page 4: Student Name:

\_\_\_\_\_ This transfer WAS NOT done for athletic purposes.

\_\_\_\_\_ This transfer WAS done for athletic purposes. NOTE: Please attach a separate statement describing your position.

The receiving school should submit this entire hardship waiver request to the Rockingham Co. Schools’ Athletic Director in a timely manner.