



Eligibility Regulation Waiver (hardship) Transfer Guidelines Form

The IHSAA defines hardship in Rule 8-14-12 as, “unusual circumstances that are unforeseen, unavoidable, or uncontrollable”.

1. Please be advised that the Idaho High School Activities Association Eligibility Committee and Board of Directors will NOT recognize the following as hardships:

- Athletic motivation
- Proximity to school / driving distance
- Gas prices
- Playing time or other coach's decisions
- Small or large class sizes
- Allegations of a better education
- Depression or anxiety without medical documentation from a mental health professional.

2. Harassment, intimidation, and bullying will only be considered if the following documentation is provided:

A copy of the previous school's anti-harassment, anti-intimidation, anti-bullying policies and procedures to the IHSAA.

Documentation that the previous school's anti-harassment, anti-intimidation, anti-bullying policies and procedures were strictly followed by both the previous school and the student/parent/guardian.

The student/parent/guardian authorization of the release of the complete record outlining the events and circumstances behind the initiation of the policies and procedures.

A detailed report of the incident(s).

An outline of the procedures used to respond to and investigate the reported incident(s).

A copy of the findings that were a result of the complaint process and investigation.

A copy of the disciplinary procedure for any individual found guilty of harassment, intimidation or bullying.

Reports of notification to parents/guardians of any student involvement in the incident(s).

A report of the intervention strategies and remedial actions the previous school undertook to assist the student and address the complaint.

3. In cases involving medical hardships, the waiver request must be accompanied by the statements of two or more medical experts from unique offices. Statements should include, in detail, the medical aspects of the case.

Certification of Application:

This is to certify that the student named herein has affected the transfer of schools as indicated, that the transfer was not for participation reasons, and that no person has used undue influence to secure this student's enrollment for purposes of activity participation. We further certify that all information herein contained is correct and understand that ineligibility may result if the information proves to be incorrect through error in statement.

I have knowingly provided all the information requested and agree to the release of all records.

Student Signature:

Date:

Parent/Guardian Signature:

Date:

School Administrator Signature:

Date: