



Registration of Foreign Exchange/International Student (Page 1 of 2)

This form must be completed, filed with all required documentation on the foreign exchange/international student, and approved by the FHSAA office each year before the student is allowed to participate in interscholastic competition. Forms can be faxed to 352.244.0232.

Name of member school: _____

City: _____ Phone: (_____) _____

SECTION 1. STUDENT RECORD INFORMATION

1. Student's full legal name as it appears on passport/birth certificate: _____

____ Foreign exchange student possessing J-1 visa ____ International student possessing F-1 visa ____ Immigrant student possessing no visa

Birthdate {mm/dd/yy}: ____ / ____ / ____ Sex: (____ Male) (____ Female) Enrolled in grade: (____ 6th) (____ 7th) (____ 8th) (____ 9th) (____ 10th) (____ 11th) (____ 12th)

2. Name of parent(s)/legal guardian(s) in home country: _____

Address of parent(s)/legal guardian(s): _____

Phone number of parent(s)/legal guardian(s): (_____) _____

3. List the following information for all schools attended by student since he/she first successfully completed the 8th grade:

Name of School	City, State, Country	Grade	School Year
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. Address of last school attended: _____

Phone number of last school attended: (_____) _____

Name of principal/headmaster/head administrator of last school attended: _____

5. Did student participate in organized athletics in home country? (____ Yes) (____ No) If yes, list the sports, level of play and organizing authority:

Sport(s) in which the student wishes to participate in your school: _____

Has student ever received financial compensation as a result of athletic participation in his/her home country? (____ Yes) (____ No)

Has student ever been under contract with an agent or other individual who represented the student's interests? (____ Yes) (____ No)

6. Name of host person(s) in Florida with whom student now resides: _____

Address of host person(s) in Florida with whom student now resides: _____

Phone number of host person(s) in Florida with whom student now resides: (_____) _____

Did your school make arrangements with host person(s) for student's housing? (____ Yes) (____ No)

Are host person(s) associated with your school (i.e., administrator, teacher, coach, parent of student, booster, alumnus, etc.)? (____ Yes) (____ No)

Did host person(s) move to U.S. with student? (____ Yes) (____ No) If yes, what is relationship of host person(s) to student? _____

7. Is student living in a school dormitory? (____ Yes) (____ No)

If yes, provide the address of the dormitory: _____

8. Does student receive financial aid? (____ Yes) (____ No) See Policy 38, "Policy on Athletic Recruiting," Section 6.0, "Financial Assistance."

If yes, what independent agency approved the need for financial aid? _____

9. Did anyone affiliated with this school contact the student or anyone representing him/her prior to placement in the school? (____ Yes) (____ No)



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School: _____ City: _____

Student: _____

SECTION 2. ELIGIBILITY VERIFICATION

1. Is a complete transcript(s) for this student translated into English on file in school? (Yes) (No)

Who translated, analyzed and evaluated the transcript(s)? _____

2. Has the student completed his/her home high school (grades 9-12 or equivalent) program? (Yes) (No)

3. Date of first successful completion of 8th grade or its equivalent (month/year): ____ / ____

4. Date entered 9th grade or its equivalent (month/year): ____ / ____

5. Date of first successful completion of 10th grade or its equivalent (month/year): ____ / ____

6. Last date previously attended home high school (month/date/year): ____ / ____ / ____

7. First date of class attendance at present high school (month/date/year): ____ / ____ / ____

8. Has student previously attended high school in the United States? (Yes) (No)

If yes, name of school: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone: (_____) _____ Fax: (_____) _____

9. Does student meet all other FHSAA eligibility requirements (see FHSAA Bylaws)? (Yes) (No)

SECTION 3. EXCHANGE PROGRAM SPONSORSHIP (if applicable)

1. Is student sponsored by foreign exchange program recognized by Council on Standards for International Educational Travel? (Yes) (No)

Name of CSIET program: _____

Address of CSIET program: _____

Phone number of CSIET program: _____

Name of exchange program representative: _____

SECTION 4. VERIFICATION BY PRINCIPAL

1. Have all provisions of "FHSAA Policy on Foreign Exchange and Other International Students" been followed? (Yes) (No)

2. Photocopy of student's birth certificate or passport is submitted to FHSAA Office with this form? (Yes) (No)

3. Photocopy of student's certificate of health insurance issued by a U.S. company is submitted to FHSAA Office with this form? (Yes) (No)

4. Photocopy of the student's immigration documents including his/her visa is submitted to FHSAA Office with this form? (Yes) (No)

5. Photocopy of student's complete original and untranslated transcript is submitted to FHSAA Office with this form? (Yes) (No)

6. Photocopy of translation and analysis of student's transcript is submitted to FHSAA Office with this form? (Yes) (No)

7. The response to each of questions 1 through 6 must be "yes." If not, provide explanation: _____

Student's signature: _____ Date: _____

Host parent/guardian signature: _____ Date: _____

Member school principal's signature: _____ Date: _____