

Norwood High School
Athletic Department

Transfer Student Eligibility Check

This form should be completed for every student transferring into Norwood High School who is interested in participating in athletics. The original should be sent to the Athletic Department and a copy remains in the Guidance Department.

Name of student: _____ D.O.B. _____

Sending school: _____
Public/private (circle one)

Date of entry into NHS: _____ Entering class of: _____

Date student first entered 9th grade: _____

Date of last physical exam: _____
FOR SCHOOL NURSE (Leave blank)

Sports played at sending school during the last academic year:

Fall Season: _____ Level: V JV F (Circle One)

Winter Season: _____ Level: V JV F (Circle One)

Spring Season: _____ Level: V JV F (Circle One)

Has student ever repeated a year of high school? yes/no

Is the student repeating a year of high school now? yes/no

Is the student returning to school after "dropping out" yes/no