

**VERIFICATION OF PRIVATE SCHOOL STUDENTS - ELIGIBILITY FOR
PARTICIPATION IN CAPE ELIZABETH EXTRACURRICULAR ACTIVITIES**

A separate application must be received for each activity in which participation is desired. This form is used to verify eligibility and to approve/deny participation.

STUDENT INFORMATION:

Student's Name:

Student's Date of Birth:

Grade in Private School:

Student's Address:

Phone Number:

Parent/Guardian's Name:

Private School Name:

Private School Address:

Private School Phone Number:

Private School Principal/Head's Name:

Student is applying for participation in the following activity:

FOR EXTRACURRICULAR ACTIVITIES

Written application received _____ (Date)

Student's written agreement to comply with behavioral, disciplinary, attendance and other rules applicable to all students in Cape Elizabeth Schools received _____ (Date)

Student's written agreement to abide by same transportation as regularly enrolled students
_____ (Date)

Sports physical (if applicable) performed on _____ (Date)

Cleared to play _____ yes _____ no

Tryout (if applicable) _____ yes _____ no

Selected (if applicable) _____ yes _____ no

Documentation:

Immunization _____ yes _____ no

Insurance _____ yes _____ no

Age eligibility _____ yes _____ no

Academic standing (principal may ask to see grades or other evidence that academic eligibility has been met) _____ yes _____ no

Student participation in the desired activity is _____ approved _____ not approved.

Decision by _____ (Name & Title)

Student/parent notified of decision: _____ (Date) _____ (Method)

Adopted: December 13, 2011