



Ohio High School Athletic Association
 4080 Roselea Place - Columbus, Ohio 43214
 Ph: 614-267-2502; Fax: 614-267-1677
 Web site: www.ohsaa.org

DISPLACED CHILD AFFIDAVIT- 2020-2021

AFFIDAVIT FOR STUDENT: _____ **Gender:** _____
GRADE LEVEL OF STUDENT: _____
TRANSFERRING FROM _____ **HIGH SCHOOL**
TRANSFERRING TO _____ **HIGH SCHOOL ON** _____ **(DATE)**
(Note: Please complete a separate form for all displaced students)

REQUIRED TO READ: This form is to be completed ONLY when a student transfers or matriculates to an OHSAA member school as a result of displacement by a natural disaster. **The "Affiant" completing this form should be the individual with whom the student is currently residing.** This form waives the residency (4-6) and transfer (4-7) bylaw requirements. However, the student is still required to meet the requirements of all other aspects of Bylaw 4, Student Eligibility. **Please complete a separate form for all displaced students.**

AFFIDAVIT OF _____ **(AFFIANT)**
FOR STUDENT: _____

STATE OF OHIO :
COUNTY OF _____ :

_____, having been duly advised and sworn, hereby states as follows:
 (Name of Affiant)

- I am of sound mind and legal age and have first hand knowledge of the facts asserted herein.
- I am the _____ **(fill in relationship)** of _____.
(Relationship to student- Mother, Grandfather, Aunt, Family Friend, etc.) (Name of Student)
- My "current resident address" is _____.
Street City State Zip
- My current resident telephone number is (_____) ____-_____.
(NOTE: Do not substitute "cell phone number" in this response unless this is your only phone.)
- I can attest that above-named child's parent(s) have/have not **(circle one)** taken up temporary housing in Ohio as a result of this same natural disaster.
- I further state that on the ___ day of _____, 20___, _____ (Name of Student) was displaced by a natural disaster known as _____ (Name of Natural Disaster). Furthermore, as a direct and proximate result of this natural disaster and resulting displacement, _____ (Name of Student) is currently in my care and control and we are both residing at the above-named address.
- I further state that all of the above-named child's permanent school records have been lost or destroyed as a result of this natural disaster. I am currently taking all steps necessary to secure duplicates of these records. _____ **(Initials of Affiant)**
- I further state that above-named child was born on _____, 20 ____.

9. I further state that above-named child was enrolled in high school (or 7-8th grade school, if applicable) for the first time on _____, 20__ at _____ High School in _____, _____.
10. I further state that the current semester of school will be the above-named child's ___ semester of high school (or 7-8th grade school, if applicable) enrollment.
11. I further state that in the preceding grade period that concluded on _____, 20__ and consisted of _____ weeks, the above-named child did receive passing grades in a minimum of five (5) credit hours of courses (passed at least 4 courses attempted for 7th - 8th grade student) that count towards said child's graduation **or** the student was eligible by the standards of the state athletic association/member school in his or her previous state. _____ **(Initials of Affiant)**
12. I further state that the above-named child did/did not **(circle one)** participate in interscholastic athletics at his/her previous high or 7th-8th grade school or in the sports of: _____. Said child did submit to a pre-participation examination prior to participating in these sports, which examination was performed on or about _____, 20__.
13. I further state that the above-named child has/has not been recruited for the purposes of athletic participation. _____ **(Initials of Affiant)**
14. I am not attempting to establish residence at the current resident address in order to avoid paying tuition to attend the public school to which the current resident address is assigned nor am I attempting to establish residence at the current resident address in order to circumvent any of the Bylaws or rules of the Ohio High School Athletic Association. _____ **(Initials of Affiant)**
15. I understand that falsification of information contained in this affidavit can result in prosecution for perjury, liability for tuition and adversely affect the eligibility status of the child/children listed herein. Furthermore, should eligibility of said child be predicated in whole or in part upon any information contained herein, which information is later learned to be false, the future eligibility of said child/children may be in jeopardy as well as the team and/school's status, their records and their future status as a member of the OHSAA. _____ **(Initials of Affiant)**

AFFIANT FURTHER SAYETH NAUGHT

Signature of Affiant

SWORN TO before me and SUBSCRIBED in my presence this _____ day of _____, 20_____.

 NOTARY PUBLIC

SCHOOL ADMINISTRATORS- Please send completed form to Dr. Deborah Moore or Ms. Roxanne Price via email