**Charlotte-Mecklenburg Schools High School Athletic Eligibility Certification Form  
TAB THROUGH FORM & TYPE INFORMATION or PRINT FORM AND WRITE INFORMATION***(Completed and signed form is required prior to any athletic participation)*

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| **Name of student-athlete** (*print*)**:** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | **Sport**: | |  | | | | | | **Grade**: | | | | |  | |
| **Home Phone:** | | | | | |  | | | | | | | **Student Cell:** | | | | | | |  | | | | | | | | | | | | | **Parent / Legal Custodian Cell:** | | | | | | | | | |  | | | | | | | |
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| **Domicile:** | | | | | The fixed and permanent dwelling place where a person intends to live for an indefinite period of time.   A person may have only one domicile and a minor’s domicile is the same as his/her parents. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1.** | | **Domicile of student-athlete** | | | | | | | | | | | | | | | | | | | | | | |  | **2.** | **Domicile of mother** | | | | | | | | | | | | | | | | | | | | | | |  |
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| Street Address – *please print* | | | | | | | | | | | | | |  | City, State, Zip Code | | | | | | | | | |  | Street Address – *please print* | | | | | | | | | | | | | | | |  | City, State, Zip Code | | | | | | | |
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| **3.** | | **Domicile of father** - *if different from domicile of mother* | | | | | | | | | | | | | | | | | | | | | | |  | **4.** | **Domicile of legal custodian or hardship caregiver** *(if applicable)* | | | | | | | | | | | | | | | | | | | | | | | |
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| Street Address – *please print* | | | | | | | | | | | | | |  | City, State, Zip Code | | | | | | | | | |  | Street Address – *please print* | | | | | | | | | | | | | | | |  | City, State, Zip Code | | | | | | | |
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| **RESIDENCY HISTORY** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | |  | | | |  | | | | | | |
|  | | Name of all individuals who reside at the domicile of the student-athlete (*print*) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Relationship to Student-athlete (*print*) | | | | | | | | | | | | | | |
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|  | | List other addresses where you have lived in the last 12 months. *Print* the street, house or apartment number, city and zip. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **PROOFS OF RESIDENCY** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | |  | | | |  | | | | | | |
|  | | One document from **both** column A and column B must be submitted with this signed pre-participation form.  These documents are for address verification and must all reflect the address provided for residency eligibility. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  |  | | --- | --- | | **Column A** | **Column B** | | • Copy of Deed OR record of most recent mortgage statement  • Copy of full Lease (including Charlotte Housing Authority and HUD leases)  and proof of most recent payment if the lease is outdated or  month-to-month  • HUD Closing Statement  • Residency Affidavit from landlord affirming tenancy  AND record of most recent rent payment, if applicable  • Affidavit of Residence and Student Hardship Status  • Section 8 agreement  • Letter from approved agency (group & foster home purposes only) | A utility bill or work order dated within the past 30 days, including:  • Gas bill • Telephone bill  • Water bill • Cable bill  • Electric bill  **- OR - - OR -**  Dated within the past 60 days: Dated within the past year:  • Payroll stub • W-2 form  • Bank or credit card statement • Vehicle tax bill  • Property tax bill  • Medicaid Card | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **ENROLLMENT HISTORY** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | |  | | | |  | | | | | | |
|  | Where did the student attend school the previous year? (*print*) | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Student has been enrolled | | | | | | | |  | | consecutive semester(s) at | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | High School | | | | |
|  | The previous semester the student attended | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | School in | | | |  | | | | | | | | | | | |
|  | Student-athlete initially entered the ninth grade in the fall of (year) | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | | | City, State | | | | | | | | | | | |
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| **CONVICTIONS** | | | | | | | |  | | | | Yes | | |  | | No | | | | Student has been convicted of or entered a plea of no contest to a felony | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **1.** | My signature certifies I have read and I understand the definition of domicile provided on this form | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **2.** | My signature certifies my domicile is located at the address listed on this form | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **3.** | My signature certifies the address provided on this form matches the address listed in Power School for the student-athlete and parent/legal custodian | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **4.** | My signature certifies the address provided has been my domicile since on or about the | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | day of | | | |  | | | | | |  |  | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Date | | |  | | | | Month | | | | | |  | Year | | |
| **5.** | My signature verifies all information provided on this form is accurate and true and that I agree to provide additional specific and current proofs of domicile if requested by school or district administration | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **6.** | My signature verifies I understand that failure to provide accurate and up-to-date information may be grounds for loss of athletic eligibility | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **SIGNATURE of Student-Athlete** | | | | | | | | | | | | | | | | | |  | **Date** | | | | | | | |  | | |  | | | | | | | | | | | | | |  |  | | | | | |
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| **SIGNATURE** **of Parent or Legal Custodian/Guardian** | | | | | | | | | | | | | | | | | |  | **Date** | | | | | | | |  | | | **Print Name** **of Parent or Legal Custodian/Guardian** | | | | | | | | | | | | | | | | | | | | |