



Florida High School Athletic Association
**Registration Form for Youth Exchange,
 Other International or Immigrant Student**

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This form must be completed, filed with all required documentation for any youth exchange, other international or immigrant (without Permanent Resident status) student, and approved by the FHSAA office each year before the student is allowed to participate in interscholastic competition. **All documents must be scanned and e-mailed to international@fhsaa.org.**

18. Did the school make arrangements with person(s) for student's housing? (___ Yes) (___ No)
If yes, explain in detail on separate page.
19. Name of person(s) in Florida with whom student now resides: _____
20. Address of person(s) in Florida with whom student now resides: _____
21. Phone number of person(s) in Florida with whom student now resides: (_____) _____
22. Is/are the person(s) associated with the school? (___ Yes) (___ No)
If yes, explain in detail on separate page (i.e., administrator, teacher, coach, parent of student, booster, alumnus, etc.).
23. Did person(s) move to U.S. with student? (___ Yes) (___ No)
 If yes, what is relationship of host person(s) to student? _____
24. Does student receive financial aid? (___ Yes) (___ No) *See Policy 36.6, "Policy on Athletic Recruiting – Financial Assistance."*
 If yes, what agency approved the need for financial aid? _____

SECTION B – ELIGIBILITY VERIFICATION

1. Date entered 9th grade/year or its equivalent {month/year}: ____ / ____ [] N/A
2. Date last attended previous school {month/day/year}: ____ / ____ / ____
3. First date of class attendance at present school {month/day/year}: ____ / ____ / ____
4. Has student previously attended high school in the United States? (___ Yes) (___ No)
 If yes, name of school: _____
 Address: _____ City: _____
 State: _____ Zip Code: _____
 Phone: (_____) _____ Fax: (_____) _____
5. **For F-1 and J-1 Visa Students Only: Student will be in attending this school the full school year** (___ Yes) (___ No)
6. **For J-1 Visa Students Only**
 Name of CSIET Organization: _____
 Address of CSIET Organization: _____
 Phone number of CSIET Organization: _____
 Name of exchange program representative: _____



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SECTION D – SUBMITTAL CHECKLIST

I. Returning Youth Exchange or Other International Students.

- If this student was previously approved for this school and there has been no change in the residence of this student, then scan and e-mail pages 1 and 3 (as partially completed), an official or athletic eligibility transcript for this student and a copy of the DS-2019 Form (J-1 Visa students) **OR** I-20A-B Form (F-1 Visa students) **OR** I-94 Form (Other International Students) to international@fhsaa.org.
- If this student was previously approved for this school and there has been a change in residence of this student, complete Section A, # 1 through #7 and #17 through #24, then scan and e-mail pages 1 through 3 (as partially complete) an official or athletic eligibility transcript for this student and a copy of the DS-2019 Form (J-1 Visa students) **OR** I-20A-B Form (F-1 Visa students) **OR** I-94 Form (Other International Students) to international@fhsaa.org.

II. First time Youth Exchange/Other International/Immigrant Students.

The following must be scanned and e-mailed to international@fhsaa.org:

- pages 1 through 3 of this form
- birth certificate (translated, if applicable) or other proof of age as per Bylaw 9.6.4.1
- fully signed and executed DS-2019 Form (J-1 Visa students) **OR** I-20A-B Form (F-1 Visa students)
- U.S. Visa or I-94 Form (Other International Students only)
- official original language transcripts from all school attended by the student since entering the 8th grade/year
- translated transcripts from all school attended by the student since entering the 8th grade/year, include name and contact information for the individual or organization providing the translation (see Policy 17.3.4)
- all separate page documents as necessary per Section A, items #16, #18 and/or #22 of this form

III. Certification.

I have reviewed pages 1 and 2 of this form, as well as all supporting documents, and having completed Part I or II above, I certify that all information is complete; all supporting documents are in order and I hereby submit them for review.

(Athletic Director signature)