2010-2011 Sports Information Checklist for Student Eligibility

	If you cannot check all 10 items, see Mr. Lamberty in the Athletic Office. (Check all that apply, 🗸)
_	1. Making academic progress toward graduation. (2.0 GPA and 4.13 Credits Per Quarter)
_	2. Will not have turned 20 before the start of the season in which I participate.
_	3. Physical exam dated within the last three (3) years on file with the school.
_	4. Have not transferred schools. If yes fill out transfer form on page 2
_	5. Will not play more than four (4) seasons in any sport in grades 9-12.
_	6. Have not dropped out of school or repeated a grade while in high school.
_	7. Have not accepted cash in any amount or merchandise valued at more than
	\$100.00 for participating in a sport.
_	8. Have not and will not compete in non-school events in my sport after reporting
	for the school team.
_	9. Have not and will not use tobacco or alcoholic beverages, use, consume,
	have in possession, buy, sell or give away any other controlled
	substance, including steroids.
_	10. Have not & will not violate the racial / religious / sexual harassment / violence
	and hazing bylaws of the MSHSI



GOOD STANDING AND GENERAL ELIGIBILITY REQUIREMENTS



- 1. **Good Standing** In order to be eligible for regular season and League tournament competition a student must be in good standing. Definition: The term "Good Standing" shall mean that the student is eligible under of all the conditions and eligibility requirements of that school as well as the eligibility requirements of the Minnesota State High School League.
- 2. **Student Code of Responsibilities -** Participation in interscholastic activities is a privilege, which is accompanied by responsibility. As a student participating in League sponsored activities, I understand and accept the following responsibilities:
 - a. I will respect the rights and beliefs of others and will treat others with courtesy and consideration.
 - b. I will be fully responsible for my own actions and the consequences of my actions.
 - c. I will respect the rights and property of others.
 - d. I will respect and obey the rules of my school and the laws of my community, state and country.
 - 3. I will show respect to those who are responsible for enforcing the rules of my school and the laws of my community, state and country.
 - 4. **Penalty** A student who is dismissed from school (suspension or otherwise) or who violates the Student Code of Responsibilities is not in good standing and is ineligible for a period of time as determined by the school principal acting on the authority of the local board of education.
 - a. The League specifically recognizes that certain conduct requires penalties that may exceed those penalties typically imposed for first violations.
 - b. For example, when a student is suspended from school the student is not in good standing and can not begin to serve the participation penalty

BYLAW 205, CHEMICAL ELIGIBILITY

- **1ST VIOLATION:** After confirmation of the first violation, the student shall lose eligibility for the next two (2) consecutive interscholastic contests and two (2) weeks of a season in which the student is a participant, whichever is greater. No exception is permitted for a student who becomes a participant in a treatment program.
- **2ND VIOLATION:** After confirmation of the second violation, the student shall lose eligibility for the next six (6) consecutive interscholastic contests in which the student is a participant or three (3) weeks, whichever is greater. No exception is permitted for a student who becomes a participant in a treatment program.
- **3**RD **AND EACH SUBSEQUENT VIOLATIONS:** After confirmation of the third or subsequent violations, the student shall, lose eligibility for the next twelve (12) consecutive interscholastic contests in which the student is a participant or four (4) weeks, whichever is greater. If after the third or subsequent violations, the student has been assessed to be chemically dependent and the student on her/his own volition becomes a participant in a chemical dependency program or treatment program, then, the student may be certified for reinstatement in MSHSL activities after a minimum period of six (6) weeks. The director or a counselor of a chemical dependency treatment center must issue such certification.

ACCUMULATIVE PENALTIES: Penalties shall be accumulative beginning with the student's first participation in a League activity and continuing through the student's high school career.

DENIAL DISQUALIFICATION: A student shall be disqualified from all inter-scholastic athletics for nine (9) additional weeks beyond the student's original period of ineligibility when the student denies violation of the rule is allowed to participate and then is subsequently found guilty of the violation.

PARENTS:

• REVIEW all of these rules and expectations with your son or daughter. Your role in stressing the value of these guidelines cannot be overstated.

TRANSFER STUDENTS ONLY	does not	apply to incoming 9 th graders!
1. Where did you start 9 th grade?		
2. Have you transferred more then once?	Yes	No
3. Why did you transfer? A. Family Moved,	B. Court Ord	lered, C. Custody Chan
If A: What was old address:		
What is new address:		
Athletic Department Info:		
a. Athletic Director:		
b. Athletic Director Email:		
c. Athletic Phone Number:		
d. Athletic Fax Number:		



Minneapolis Public Schools Eligibility Information

Attendance:

No athlete shall absent himself/herself from any class more than four times during the first three weeks of any grading period. Further no athlete shall absent himself/herself from a class more than five days each of the second and third three week periods in a grading period.

The penalties that shall be applied if absences exceed the above limitations shall be as follows:

Five absences from any class the first three weeks shall carry a two contest suspension.

Ten absences from any class the first six weeks shall carry a two week suspension from all contests or scrimmages. The student may practice.

Academic Requirements:

- Entering Freshmen are Eligible.
- ❖ All athletes must earn at least a 2.00 G.P.A. during the grading period prior to participation.
- ❖ Students/athletes are also required to maintain a 4.13 per quarter average on a cumulative credit basis. Students remain eligible if they are within 2 credits of this cumulative credit requirement.
- ❖ After 8 semesters, no student is eligible.
- ❖ Students new to the Minneapolis Public Schools are eligible if they were eligible in their previous school provided they are within 2 credits of the cumulative credit requirement, required by Minneapolis Public Schools.

Participation Fee Refunds: After the beginning of the season, a refund request will be honored only if the student, through no fault of his/her own, cannot continue with the activity. No refund will be provided in the case of quitting a team or being dropped from a team because of disciplinary action. The allowable reasons for refund include: a crippling injury, or a transfer to another school out of the district. In any case, the refund will be a prorated amount up to the midseason of the activity. There will be no refunds after the midseason of the activity has been reached.

	FILL THIS OUT ONLY IF R	ETURNING FROM SERI	OUS INJURY	
PHYSICIAN'S APPROV	AL TO RESUME PARTICIPATION I	N INTERSCHOLASTIC ACTIVIT	TIES	
herewith certify that _				
,	Student	G	Grade	
of		is	s physically able to resume practice or play in al	ĺ
	School			
nigh school interschola	stic activities at the level of activity	indicated below:		
J Full Participation	☐ Practice Without Contact	☐ Training or Conditioning	Only	
	f	ollowing medical treatment for	r illness or injury on(Date) .	
This student: 🗖 Must re	eturn to me before resuming full pa	rticipation ☐ Does not need to r	return to me before resuming full participation	
Date	Attending Physician (Print	:) F	Physician's Signature	
	ement must be filed with the school	The state of the s	participation in interscholastic athletics or	
3				

FILL THIS OUT ONLY IF RETURNING FROM SERIOUS INJURY

2010-2011 MSHSL ATHLETIC ELIGIBILITY STATEMENT - RETURN TO ATHLETIC OFFICE-

Statement to be signed by the participant from a MSHSL member school and by the participant's parent or guardian

- I have read, understand, and acknowledge receiving the 2008-2009 Athletic Eligibility Brochure, which contains only a summary of the eligibility rules of the Minnesota State High School League. I understand that a copy of the Official Handbook of the MSHSL is on file with the senior high school athletic director and or principal and that I may review it, in its entirety, if I so choose. The Official Handbook and MSHSL bylaws are also posted on the MSHSL Web site: www.mshsl.org in the Resources/Publications/Eligibility section for my review.
- I understand that once I sign the eligibility statement all eligibility rules apply:
 - -- Twelve (12) months of the year;
 - -- Whether I am currently participating or not;
 - -- Continuously from the first signing of the statement through the completion of my high school eligibility.
- I further understand that a member school of the MSHSL must adhere to all of the rules and regulations that pertain to the League athletic activities a school may sponsor and that local rules may be more stringent, and penalties more severe, than MSHSL rules.

STUDENT CODE OF RESPONSIBILITIES

- As a student participating in my school's interscholastic activities, I understand and accept the following responsibilities:
 - I will respect the rights and beliefs of others and will treat others with courtesy and consideration.
 - I will be fully responsible for my own actions and the consequences of my actions.
 - I will respect the property of others.
 - I will respect and obey the rules of my school and the laws of my community, state and country.
 - I will show respect to those who are responsible for enforcing the rules of my school and the laws of my community, state and country.

A student whose character or conduct violates the Student Code of Responsibilities or is suspended or expelled is not in good standing and is ineligible for a period of time as determined by the principal. While a student not in good standing, a student may not serve any penalty for MSHSL bylaw violations.

- Informed Consent: By its nature, participation in interscholastic athletics includes risk of injury and the transmission of infectious diseases such as HIV, Herpes and Hepatitis B and others. Although serious injuries are not common and the risk of HIV transmission is almost nonexistent in supervised school athletic programs, it is impossible to eliminate all risk. Participants have the responsibility to help reduce that risk. Participants must obey all safety rules, report all physical and hygiene problems to their coaches, follow a proper conditioning program, and inspect their own equipment daily. PARENTS, GUARDIANS OR STUDENTS WHO MAY NOT WISH TO ACCEPT THE RISK DESCRIBED IN THIS WARNING SHOULD NOT SIGN THIS FORM. STUDENTS MAY NOT PARTICIPATE IN AN MSHSL-SPONSORED ACTIVITY WITHOUT THE STUDENT'S AND PARENT'S/GUARDIAN'S SIGNATURE.
- I consent to the athletic trainer or coach treating injuries and authorize them to discuss those injuries with and release any applicable
 medical information or records relating to those injuries to coaches, school staff and other qualified health care providers as deemed
 necessary within their scope of practice.
- I further understand that in the case of injury or illness requiring transportation to a health care facility, that a reasonable attempt will be made to contact the parent or guardian in the case of the student-athlete being a minor, but that, if necessary, the student-athlete will be transported via ambulance to the nearest hospital.
- By signing this we acknowledge that we have read the information contained in the Athletic Eligibility Brochure and Statement.

The student/parent authorizes the release of documents and other pertinent information by the school in order to determine student eligibility. In addition, the student/parent understands and agrees that public information shall include names and pictures of students participating in or attending extra-curricular activities, school events, and High School League activities or events.

*				
Student's Signature	Student ID #	Birth Date	Grade in School	Date
*				
Parent's or Guardian's Signature	ANE	So		Date
	S MSH	SL		



Student Nar	ne	s	Sex M / F Age		//	_
Grade	School	Sport(s)				_
Address	·		Phone_			
DATE OF LA	AST SPORTS QUALIFY	ING PHYSICAL EXAM (SQ	(PE)/			
Circle yes (Y) o	no (N) Circle questions yo	u don't know the answers to.				
Since your la 1. Has a docto 2. Do you hav 3. Have you p 4. Have you h 6. Does your h 7. Has a docto 8. Has anyone 9. Has any far 10. Has anyor 11. Have you 12. Have you 13. Have you 14. Do you ha 15. Do you ha 16. Have you 17. Have you 18. Have you 19. Have you 20. When exe	st SQPE or Sports Health Querestricted your participation eany new allergies to medicinassed out or nearly passed out assed out or nearly passed out assed out or nearly passed out and discomfort, pain, tightness, leart race or skip beats during or ordered a test for your heart in your immediate family died in your immediate family be spent the night in a hospital? The properties of the p	uestionnaire: in sports for any reason? nes, pollens, foods, or stinging insect the URING exercise? It AFTER exercise? It Security or a sudden death de	cercise? am, stress test) apparent reason? before age 50? me? endinitis or stress fract uring or after exercise? nuing headaches? ms or legs after being le ill?	ture that has not healed?		Y
If "Yes" is cir participation. signed by the	Please note that each s	ove I have reviewed the quest student/athlete is required to h t be on file in the athletic offic	nave an athletic phy			
	al Guardians: For the safet ne coaches or athletic/activi	y of your student-athlete, please ities director to know:	note below any healtl	h concerns, medications	s, or allergies that m	ay be
I do not know of are true and acc	any existing physical or addit curate and I approve participat	tional health reason that would precition in athletic activities.	lude participation in sp	ports. I certify that the answ	wers to the above que	estions
Parent or Legal	Guardian signature	Athlete	e signature		Date	

This Health Questionnaire must be completed, signed and placed on file in the school office <u>each</u> <u>year</u> before the student will be permitted to practice or play.

Reference: Pre-participation Physical Evaluation (Third Edition): AAFP, AAP, AMSSM, AOSSM, AOASM; McGraw-Hill, 2004.

Southwest Athletic Policy Agreement - Return to Athletic Director

Student Athlete Pledge:

As a participant in athletics at Southwest High School, I agree to abide by the Minnesota State High School Rules. I will not use, have in my possession alcohol, tobacco, or any other illegl drugs. Chemical Dependency is a progressive but treatable disease, characterized by continued drinking and drug use. Therefore I accept and pledge to abide by the training rules listed in the MSHSL handbook and others established by my coach and school.

To demonstrate my support, I pledge to:

- 1. Support my fellow teammates by setting an example and abstaining from the use of alcohol, tobacco, and other drugs.
- I will not cover for, enable, or lie for my teammates, if any rules are broken. I will hold my teammates responsible and accountable for their actions
- 3. I will contact the athletic office and seek information and assistance in dealing with my own or my teammates problems
- 4. I pledge to be honest and open with my parents about my feelings, needs, and problems
- 5. I will be honest and open with my coach and other school personnel when the interest of my teammates is being jeopardized.

Ι,		agree to abide by the Student Pledge
	(Student Signature)	
Ι,		agree to support my student-athlete
	(Parent/Guardian Signature)	

MEDIA RELEASE FORM MINNEAPOLIS PUBLIC SCHOOLS ATHLETICS

Throughout the upcoming season, the media may visit our events, request information about our events as well as our footage of our events. During the upcoming season, the Athletic Departments of Minneapolis Public Schools will be releasing your child's name and images for many reasons including but not limited to team rosters, promotional materials, game footage, team pictures, as well as information for College Recruiters if appropriate. This information may be used or shown on Websites/Radio Stations/Television Stations/School Event Programs/Posters/Brochures and/or Newsletters. Because of state law, a school must obtain your permission before your child's photograph or voice can be used by the media or the district. Please sign and return this document giving your permission to allow the Minneapolis Public Schools Athletic Department to use your child's athletic interest for promotional, informational as well as educational purposes.

*Athletic Equipment Agreement

To take part in athletics at Southwest High School and agree not to hold the school or its representatives responsible for injuries which may be incurred through such participation. I will be responsible for the return of any equipment loaned to him/her and will reimburse the school should such articles not be returned when called for.

A \$10.00 fine will be assessed for equipment not turned in within 10 days of participation in that sport. There will be additional charges after that point. MSHSL bylaw 208.00 forbids the use of High School uniforms for the off-season If student athlete is cut from the athletic team, participation fee must be transferred into another sport of the same season or be picked up in the athletic office within 15 days of dismissal notification.

*Transportation Agreement:

Southwest athletic department reserves the right to require all athletes to ride to and from each athletic event with a coach. If for any reason the athlete is unable to ride with the team from an event the athlete's parents/guardian must fill out a transportation waiver. The waiver must be filled out by the parent/guardian in person, in the athletic office, 24 hours prior to the event.

I agree to all of the ito participate in athle	(student name& id #)		
(Signate	ure of Student)	Date	
(Print Name)	 (Signature of parent/guardian)	Date	