NCISAA Foreign and/or Exchange Student Information for NCISAA Athletic Participation 2010 - 2011

School Name: _____

Athletic Director: _____ Telephone: _____

Head of School: _____ Telephone: _____

Note: If no exchange or foreign students will participate in NCISAA competition, please indicate same by checking this box ☐ and signing below.

Student's Name: _____
Last First MI

Date of Birth: _____ Grade: _____

Country of Birth: _____ Country of Citizenship: _____

Type of Visa issued by Immigration and Naturalization Service: _____

Note: If student has not entered school via a credentialed exchange agency, attach a separate letter of explanation.

List sports in which student may/will participate:

• _____ • _____

• _____ • _____

Does student receive any need-based financial aid? _____

Does student receive any scholarship assistance based on merit? _____

Does the student live with a host family? _____

Name of family: _____

Relationship to school: _____

Telephone: _____

I hereby attest that the above information is accurate and the above named student is enrolled at _____ as a full time student meeting all eligibility requirements of the most current policies of the NCISAA.

_____
Athletic Director's Signature

_____
Head of School's Signature

_____
Date

Please return this form to the NCISAA office along with your annual membership fees and information and financial aid statement.