

New Mexico Activities Association

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Form C

Transfer Record From Previous School(s)

TO BE COMPLETED BY PETITIONING SCHOOL:

This form, for the entire previous school year, is a required part of the NMAA petitioning process. When determining the eligibility of students, it is the school's responsibility to read and follow all sections of the NMAA Handbook. No ruling is final unless received in writing or by facsimile.

STUDENT'S NAME _____

BIRTHDATE ____/____/____

PETITIONING SCHOOL _____ FIRST DAY OF **25/26** SCHOOL YEAR ____/____/____

DATE STUDENT ENROLLED AT PETITIONING SCHOOL ____/____/____ GRADE ENTERING _____

PREVIOUS SCHOOL ATTENDED _____

STUDENT'S CURRENT ADDRESS _____

IS THIS ADDRESS IN YOUR SCHOOL'S ATTENDANCE ZONE?

☐ YES

☐ NO

STUDENTS PHYSICAL ADDRESS AT PREVIOUS SCHOOL (if applicable):

STUDENT'S PARENT(S) NAMES:

STUDENT'S SIBLINGS – NAMES, AGES AND SCHOOLS ATTENDING:

NEW – We, the undersigned, acknowledge that this form is necessary to determine the athletic eligibility of a student, that the information requested is required to make such a determination, that all supporting documentation must be included at the time the petition is initially submitted, and that by declining to sign and acknowledge this form, the NMAA shall not be permitted to make a varsity ruling on the student.

Athletic Director Signature

Date

Parent(s) Signature

Date

Second page needs to be started by petitioning school (Student's Name, Petitioning School, and Petitioning School Fax Number or Email Address) and then both pages sent to former school to be completed and returned to Petitioning School

STUDENT'S NAME _____

PETITIONING SCHOOL _____

PETITIONING SCHOOL FAX / EMAIL _____

TO BE COMPLETED BY PREVIOUS SCHOOL:

This form is required by the NMAA to determine the eligibility status of a student transferring into an NMAA member school. Your assistance in completing this form and returning it to the petitioning school is greatly appreciated.

1. Enrollment in any high school. List **all** schools attended, including partial and/or broken semesters.

	Dates Attended	School (Name and Address)
a. 8 th Grade	_____	_____
b. 9 th Grade	_____	_____
c. 10 th Grade	_____	_____
d. 11 th Grade	_____	_____
e. 12 th Grade	_____	_____

2. Parent(s)/Guardian(s) name(s) _____

3. Physical address of parent(s)/guardian(s) when student was enrolled in your high school: _____

4. Is this address in your school's attendance zone? ☐ Yes ☐ No

5. **NEW** – Indicate by a checkmark those sports in which the student **competed** for a high school team at any level (varsity or sub-varsity) during the **24/25** and **25/26** school years. Include all sports. If student did not compete or enter a game/match in any sport, please indicate so in the box(es) to the far right.

Please fill out completely

FALL	24/25	25/26	WINTER	24/25	25/26	SPRING	24/25	25/26	DNP	24/25	25/26
Cross Country			Basketball			Baseball			If no participation, please indicate which year(s).		
Football			Cheer			Golf					
Soccer			Dance			Softball					
Volleyball			Powerlifting			Tennis					
			Swimming			Track					
			Wrestling								

6. **NEW** – Did this student tryout or practice in five (5) or more practices at your school during the current 2025-2026 school year? ☐ Yes ☐ No

If "yes" please list which sport(s): _____

7. Does this student have any fines, fees and/or outstanding debts owed to the school? ☐ Yes ☐ No

If "yes" please explain: _____

8. Would this student have been scholastically eligible for athletics if he/she had remained at your school?

☐ Yes ☐ No

If "no", please explain: _____

9. Did this student have attendance issues at your school? ☐ Yes ☐ No

If "yes", please explain: _____

10. Did this student have a clean discipline record at your school? ☐ Yes ☐ No

If "no" please explain: _____

11. Do you believe that this student was in any way encouraged or recruited for transfer for athletic purposes?

☐ Yes ☐ No

If "yes" please explain: _____

12. Are there additional investigations we should make? ☐ Yes ☐ No

If "yes" please explain, including name and address of any person that should be contacted: (Attach a separate sheet if necessary.) _____

13. Please give any additional information that may assist us in the determination of the eligibility status of this student. We desire to be fair to the student, your school and to the rules to which we have subscribed.

I hereby certify that the above information is accurate and complete:

Athletic Director's Signature & Date

School Name/District