**Form D:**

**8th Grade Students**

**participating in sub-varsity**

**activities.**

**(Created 8/15)**

**Georgia High School Association**

151 South Bethel Street

Thomaston, GA 30286

706-647-7473 Fax: 706-647-2638

**Certificate of Eligibility- 8th Graders**

School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Year\_\_\_\_\_\_\_\_\_\_\_\_\_ Region and Classification\_\_\_\_\_\_\_\_\_\_\_

INSTRUCTIONS: THIS FORM MUST BE TYPED. Send the original to the GHSA . The original will be returned to you showing the eligibility status of each student on the list.

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| --- | --- | --- | --- | --- | --- |
| Name | Date of Birth | Date Entered 8th Grade | Activity | Meets MS Academic Requirements | GHSA Status |
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I certify that the information for the student(s) listed on this form is taken from the student’s permanent records and meets all eligibility requirements for interscholastic competition under the rules and regulations as stated in the current edition of the GHSA Constitution and By-Laws. I understand that incorrect information will severely penalize my school and students.

SIGNED\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Superintendent or School Official) (Report Preparer)