



Foreign Student Reporting Form

New York State Public High School Athletic Association

Address questions to: **Kim Schon, Assistant Executive Director, (716) 821-7582**

Return form to: **Kim Schon** kschon@e1b.org **Email is preferred**
Section VI, 355 Harlem Rd., West Seneca, NY 14224

Foreign Student Name _____

Country of Origin _____

Date of Birth _____

Has the student graduated from the secondary school system in their country?

YES or NO (Select Yes or No)

If YES, the student is not eligible for interscholastic athletic participation.

If NO, please complete the rest of the form

This foreign student possesses a: J1 visa F1 visa (Select one)

As stated in the NYSPHSAA, Inc. Handbook, the foreign student meets the standards and criteria of the following: (Check one)

Is a bona fide **Foreign Exchange Student**, who is a participant in the approved CSIET program

LIST FULL NAME OF FOREIGN EXCHANGE PROGRAM in line above

Is an **International Student** under the requirements of **Standard #9 Foreign Student and #31 Transfer**

The student is living with the Athletic Director or a member of the coaching staff and has not played the sport(s) competitively. Please attach supporting documentation.

The student is interested in participating in the following sports:

Fall _____

Winter _____

Spring _____

Athletic Director Name _____

School _____

Athletic Director Signature _____

Date _____

Send to: Section VI **Assistant Executive Director Kim Schon** kschon@e1b.org

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