

**MPA TRANSFER WAIVER APPROVAL FORM**

This form is to be processed when a student transfers from one school to another without a corresponding change of legal residence of parent/guardian and wishes to participate in interscholastic athletics within one year of the transfer (MPA By-Laws, Article III, Section 4). The process and responsibilities are as follows:

1. Either **PRINCIPAL** may initiate the process by making this form available to the transferring student and his/her parents/guardians for their signature(s). The initiating principal shall then sign and forward this form to the second principal for his/her signature.
2. The second **PRINCIPAL** shall sign the form and forward it to the MPA Executive Director for approval. All shall sign in a timely manner.
3. The transferring student is eligible the day this form is approved by the MPA Executive Director or the Eligibility Committee.

I hereby certify that \_\_\_\_\_ has transferred from \_\_\_\_\_ to \_\_\_\_\_ as of \_\_\_\_\_ and to the best of my knowledge the student has not transferred primarily for athletic purposes (see MPA By-Laws, Article III, Section 4, Subsection A, Paragraph 3).

Parents'/Guardians' Signatures: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Sending Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_ Do Certify      \_\_\_ Do Not Certify

Receiving Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_ Do Certify      \_\_\_ Do Not Certify

**WHEN ALL SIGNATURES ARE COMPLETED, IMMEDIATELY FAX THIS FORM TO THE MPA (207-622-1513) AND MAIL THE ORIGINAL TO:**

**MPA  
PO Box 2468, 50 Industrial Drive  
Augusta, ME 04338-2468**

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**\*\*\*FOR MPA USE ONLY\*\*\***

This request for a waiver of the Transfer Rule is:

\_\_\_ Granted By: MPA Executive Director \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_ Referred to the Eligibility Committee: \_\_\_ Granted      \_\_\_ Denied Date: \_\_\_\_\_

Notification sent to both schools on: \_\_\_\_\_ By: \_\_\_\_\_