



2009-2010 Sports Information Checklist for Student Eligibility



If you cannot check all 10 items, see Mr. Lamberty in the Athletic Office.
(Check all that apply, ✓)

- _____ 1. Making academic progress toward graduation. (2.0 GPA and 4.13 Credits Per Quarter)
- _____ 2. Will not have turned 20 before the start of the season in which I participate.
- _____ 3. Physical exam dated within the last three (3) years on file with the school.
- _____ 4. Have not transferred schools.
- _____ 5. Will not play more than four (4) seasons in any sport in grades 9-12.
- _____ 6. Have not dropped out of school or repeated a grade while in high school.
- _____ 7. Have not accepted cash in any amount or merchandise valued at more than \$100.00 for participating in a sport.
- _____ 8. Have not and will not compete in non-school events in my sport after reporting for the school team.
- _____ 9. **Have not and will not use tobacco or alcoholic beverages, use, consume, have in possession, buy, sell or give away any other controlled substance, including steroids.**
- _____ 10. Have not & will not violate the racial / religious / sexual harassment / violence and hazing bylaws of the MSHSL.



GOOD STANDING AND GENERAL ELIGIBILITY REQUIREMENTS



1. **Good Standing** - In order to be eligible for regular season and League tournament competition a student must be in good standing. Definition: The term "Good Standing" shall mean that the student is eligible under of all the conditions and eligibility requirements of that school as well as the eligibility requirements of the Minnesota State High School League.
2. **Student Code of Responsibilities** - Participation in interscholastic activities is a privilege, which is accompanied by responsibility. As a student participating in League sponsored activities, I understand and accept the following responsibilities:
 - a. I will respect the rights and beliefs of others and will treat others with courtesy and consideration.
 - b. I will be fully responsible for my own actions and the consequences of my actions.
 - c. I will respect the rights and property of others.
 - d. I will respect and obey the rules of my school and the laws of my community, state and country.
 - e. I will show respect to those who are responsible for enforcing the rules of my school and the laws of my community, state and country.

3. **Penalty** - A student who is dismissed from school (suspension or otherwise) or who violates the Student Code of Responsibilities is not in good standing and is ineligible for a period of time as determined by the school principal acting on the authority of the local board of education.
- The League specifically recognizes that certain conduct requires penalties that may exceed those penalties typically imposed for first violations.**
 - For example, when a student is suspended from school the student is not in good standing and can not begin to serve the participation penalty**

PARENTS: · REVIEW the following rules with your son or daughter. Your role in stressing the value of these guidelines cannot be overstated.

Bylaw 205, Chemical Eligibility

***1st Violation**

After confirmation of the first violation, the student shall lose eligibility for the next two (2) consecutive interscholastic contests and two (2) weeks of a season in which the student is a participant, whichever is greater. No exception is permitted for a student who becomes a participant in a treatment program.

***2nd Violation**

After confirmation of the second violation, the student shall lose eligibility for the next six (6) consecutive interscholastic contests in which the student is a participant or three (3) weeks, whichever is greater. No exception is permitted for a student who becomes a participant in a treatment program.

*** 3^{re} and each subsequent violations**

After confirmation of the third or subsequent violations, the student shall, lose eligibility for the next twelve (12) consecutive interscholastic contests in which the student is a participant or four (4) weeks, whichever is greater. If after the third or subsequent violations, the student has been assessed to be chemically dependent and the student on her/his own volition becomes a participant in a chemical dependency program or treatment program, then, the student may be certified for reinstatement in MSHSL activities after a minimum period of six (6) weeks. The director or a counselor of a chemical dependency treatment center must issue such certification.

***Accumulative Penalties**

Penalties shall be accumulative beginning with the student's first participation in a League activity and continuing through the student's high school career.

***Denial Disqualification**

A student shall be disqualified from all inter-scholastic athletics for nine (9) additional weeks beyond the student's original period of ineligibility when the student denies violation of the rule is allowed to participate and then is subsequently found guilty of the violation.

PHYSICIAN'S APPROVAL TO RESUME PARTICIPATION IN INTERSCHOLASTIC ACTIVITIES

I herewith certify that _____

Student

Grade

of _____ is physically able

School

to resume practice or play in all high school interscholastic activities at the level of activity indicated

below: Full Participation Practice Without Contact Training or Conditioning

Only Other _____ following medical treatment for illness or

injury on _____ (Date) .

This student: Must return to me before resuming full participation

Does not need to return to me before resuming full participation

Date Attending Physician (Print) Physician's Signature

NOTE: This signed statement must be filed with the school before the student resumes participation in interscholastic athletics or cheerleading activities.



Minneapolis Public Schools Eligibility Information

Attendance: No athlete shall absent himself/herself from any class more than four times during the first three weeks of any grading period. Further, no athlete shall absent himself/herself from a class more than five days each of the second and third three week periods in a grading period. The penalties that shall be applied if absences exceed the above limitations shall be as follows: Five absences from any class the first three weeks shall carry a two contest suspension.

Ten absences from any class the first six weeks shall carry a two week suspension from all contests or scrimmages. The student may practice.

Academic Requirements:

- ❖ Entering Freshmen are eligible.
- ❖ All athletes must earn at least a 2.00 G.P.A. during the grading period prior to participation.
- ❖ Students/athletes are also required to maintain a 4.13 per quarter average on a cumulative credit basis. Students remain eligible if they are within 2 credits of this cumulative credit requirement.
- ❖ After 8 semesters, no student is eligible.
- ❖ Students new to the Minneapolis Public Schools are eligible if they were eligible in their previous school provided they are within 2
- ❖ credits of the cumulative credit requirement, required by Minneapolis Public Schools.

Participation Fee Refunds: After the beginning of the season, a refund request will be honored only if the student, through no fault of his/her own, cannot continue with the activity. No refund will be provided in the case of quitting a team or being dropped from a team because of disciplinary action. The allowable reasons for refund include: a crippling injury, or a transfer to another school out of the district. In any case, the refund will be a prorated amount up to the midseason of the activity. There will be no refunds after the midseason of the activity has been reached.



RETURN TO ATHLETIC DIRECTOR MSHSL ANNUAL SPORTS HEALTH QUESTIONNAIRE FORM

DATE ___/___/___

Student Name _____ Sex M / F Age _____ BirthDate ___/___/___

Grade _____ School _____ Sport(s) _____

Address _____ Phone _____

DATE OF LAST SPORTS QUALIFYING PHYSICAL EXAM (SQPE) ___/___/___

Circle yes (Y) or no (N) Circle questions you don't know the answers to.

| Since your last SQPE or Sports Health Questionnaire: | Y / N |
|---|-------|
| 1. Has a doctor restricted your participation in sports for any reason? | Y / N |
| 2. Do you have any new allergies to medicines, pollens, foods, or stinging insects? | Y / N |
| 3. Have you passed out or nearly passed out DURING exercise? | Y / N |
| 4. Have you passed out or nearly passed out AFTER exercise? | Y / N |
| 5. Have you had discomfort, pain, tightness, or pressure in your chest during exercise? | Y / N |
| 6. Does your heart race or skip beats during exercise? | Y / N |
| 7. Has a doctor ordered a test for your heart? (for example, ECG, echocardiogram, stress test) | Y / N |
| 8. Has anyone in your immediate family died suddenly and unexpectedly for no apparent reason?..... | Y / N |
| 9. Has any family member or relative died of heart problems or of sudden death before age 50?..... | Y / N |
| 10. Has anyone in your immediate family been diagnosed with Marfan's syndrome?..... | Y / N |
| 11. Have you spent the night in a hospital? | Y / N |
| 12. Have you had surgery?..... | Y / N |
| 13. Have you had an injury, like a sprain, muscle or ligament tear, dislocation, tendinitis or stress fracture that has not healed? | Y / N |
| 14. Do you have asthma or allergies that are not controlled? | Y / N |
| 15. Do you have cough, wheeze, chest tightness, or have difficulty breathing during or after exercise? | Y / N |
| 16. Have you had infectious mononucleosis (mono) within the last month?..... | Y / N |
| 17. Have you had a head injury or concussion that still has symptoms like continuing headaches?..... | Y / N |
| 18. Have you had a seizure?..... | Y / N |
| 19. Have you had numbness, tingling, weakness, or inability to move in your arms or legs after being hit or falling?..... | Y / N |
| 20. When exercising in the heat, do you have severe muscle cramps or become ill?..... | Y / N |
| 21. Do you limit or carefully control what you eat?..... | Y / N |

****This area must be filled out by parent/guardian!!**

If "Yes" is circled for any question above I have reviewed the question again and determined my child should be cleared for participation. Please note that each student/athlete is required to have an athletic physical every three years, this physical must be signed by the doctor and a copy must be on file in the athletic office!

Parents' Clearance for Sports: (circle one) Yes / No

Parents or Legal Guardians: For the safety of your student-athlete, please note below any health concerns, medications, or allergies that may be important for the coaches or athletic/activities director to know:

I do not know of any existing physical or additional health reason that would preclude participation in sports. I certify that the answers to the above questions are true and accurate and I approve participation in athletic activities.

Parent or Legal Guardian signature _____ Athlete signature _____ Date _____

This Health Questionnaire must be completed, signed and placed on file in the school office each year before the student will be permitted to practice or play.

Reference: Preparticipation Physical Evaluation (Third Edition): AAFP, AAP, AMSSM, AOSSM, AOASM ; McGraw-Hill, 2004.

**Southwest Athletic Policy Agreement -
RETURN TO ATHLETIC DIRECTOR**

Student Athlete Pledge:

As a participant in athletics at Southwest High School, I agree to abide by the Minnesota State High School Rules. I will not use, have in my possession alcohol, tobacco, or any other illegal drugs. Chemical Dependency is a progressive but treatable disease, characterized by continued drinking and drug use. Therefore I accept and pledge to abide by the training rules listed in the MSHSL handbook and others established by my coach and school.

To demonstrate my support, I pledge to:

1. Support my fellow teammates by setting an example and abstaining from the use of alcohol, tobacco, and other drugs.
2. I will not cover for, enable, or lie for my teammates, if any rules are broken. I will hold my teammates responsible and accountable for their actions
3. I will contact the athletic office and seek information and assistance in dealing with my own or my teammates problems
4. I pledge to be honest and open with my parents about my feelings, needs, and problems
5. I will be honest and open with my coach and other school personnel when the interest of my teammates is being jeopardized.

I, _____ agree to abide by the Student Pledge
(Student Signature)

I, _____ agree to support my student-athlete
(Parent/Guardian Signature)

*****MEDIA RELEASE FORM MINNEAPOLIS PUBLIC SCHOOLS ATHLETICS*****

Throughout the upcoming season, the media may visit our events, request information about our events as well as our footage of our events. During the upcoming season, the Athletic Departments of Minneapolis Public Schools will be releasing your child's name and images for many reasons including but not limited to team rosters, promotional materials, game footage, team pictures, as well as information for College Recruiters if appropriate. This information may be used or shown on Websites/Radio Stations/Television Stations/School Event Programs/Posters/Brochures and/or Newsletters. Because of state law, a school must obtain your permission before your child's photograph or voice can be used by the media or the district. Please sign and return this document giving your permission to allow the Minneapolis Public Schools Athletic Department to use your child's athletic interest for promotional, informational as well as educational purposes.

***Athletic Equipment Agreement**

To take part in athletics at Southwest High School and agree not to hold the school or its representatives responsible for injuries which may be incurred through such participation. I will be responsible for the return of any equipment loaned to him/her and will reimburse the school should such articles not be returned when called for.

A \$10.00 fine will be assessed for equipment not turned in within 10 days of participation in that sport. There will be additional charges after that point. MSHSL bylaw 208.00 forbids the use of High School uniforms for the off-season

If student athlete is cut from the athletic team, participation fee must be transferred into another sport of the same season or be picked up in the athletic office within 15 days of dismissal notification.

***Transportation Agreement:**

Southwest athletic department reserves the right to require all athletes to ride to and from each athletic event with a coach. If for any reason the athlete is unable to ride with the team from an event the athlete's parents/guardian must fill out a transportation waiver. The waiver must be filled out by the parent/guardian in person, in the athletic office, 24 hours prior to the event.

I agree to all of the information in this packet and allow _____
to participate in athletics at Southwest High School (student name & id #)

(Signature of Student) Date _____

(Print Name) - _____
(Signature of parent/guardian) Date _____