2024-25 Grade 8-9 Transfer Form



This form should only be used for students transferring for the first day of their Grade 9 year (2024-2025 school year). Students who are listed in STARS at their previous school will be transferred to your school, and those students not listed in STARS will be added by BCSS.

By submitting this form, we, the undersigned, agree that the student(s) named on the list meet the requirements to participate under section 810.0 & 820.0.

PLEASE REVIEW THE FULL POLICY IN THE BC SCHOOL SPORTS HANDBOOK HERE.

Please email the completed form to info@bcschoolsports.ca.

| Receiving School Name: | | |
|------------------------|--|--|
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| Student Name (First, Last) | Gender (M/F) | Date of Birth (YYYY-MM-DD) | Year Of Entry Into Gr. 8 | Leaving School | Entry Date into Receiving School |
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| Athletic Director Name: | Administrator Name: | | |
|------------------------------|--------------------------|--|--|
| Athletic Director Signature: | Administrator Signature: | | |