

**VERIFICATION OF PRIVATE SCHOOL STUDENT ELIGIBILITY FOR PARTICIPATION IN CAPE ELIZABETH COCURRICULAR ACTIVITIES**

A separate application must be received for each activity in which participation is desired. This form is used to verify eligibility and to approve/deny participation.

**STUDENT INFORMATION**

Student's Name:

Student's Date of Birth:

Grade in Private School:

Student's Address:

Phone Number:

Parent/Guardian's Name:

Private School Name:

Private School Address:

Private School Phone Number:

Private School Principal/Head's Name:

Student is Applying for Participation in the Following Activity: \_\_\_\_\_

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**FOR COCURRICULAR ACTIVITIES**

\_\_\_\_\_ Written application received \_\_\_\_\_ [Date]

\_\_\_\_\_ Student's written agreement to comply with behavioral, disciplinary, attendance and other rules applicable to all students in Cape Elizabeth Schools

Student participation in the desired activity is \_\_\_\_\_ approved \_\_\_\_\_ not approved

Decision by: \_\_\_\_\_ [Name and Title]      Date: \_\_\_\_\_

Student/parent notified of decision: Date: \_\_\_\_\_ Method: \_\_\_\_\_

Adopted: December 13, 2011