

**EL PASO INDEPENDENT SCHOOL DISTRICT
ATHLETIC OFFICE**

Revised 07/18/07

HIGH SCHOOL ELIGIBILITY FORM

*This form must be completed and sent to the Athletic Office prior to the first day of competition.

SCHOOL _____

DATE _____

COACH _____

BOYS _____ GIRLS _____

SPORT _____

CIRCLE LEVEL: VARSITY JV 9TH

Print or Type Student Names:

	GRADE LEVEL	Parent Orientation	Acknowledgement of Rules, Physicals, Parent Approvals, Emergency Cards, Steroid Form	Previous Athletic Participation Form *Must be filled in OF- on file NA-not needed	Academically Eligible
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					

I certify that the students are eligible and have met all UIL and EPISD Regulations.

COACH

TRAINER