

# **Santa Cruz City Schools Athletic Clearance Packet**

**Harbor High      Santa Cruz High      Soquel High**

405 Old San Jose Road, Soquel, California

95073 (831) 429-3410 [www.sccs.net](http://www.sccs.net)

**2014 - 2015**

**Part I and Part II of the Athletic Packet is posted on line at each school's website**

## **Athletic Clearance Process Instructions**

**(Please Read Carefully)**

**All Clearance Paperwork must be returned to and cleared by the site Athletic Director prior to any team contact or participation**

1. This packet is separated into two different sections indicated as Part I Athletic Clearance Forms and Part II Contract / Policy Explanations
2. Part I includes all forms, contracts and legal documents that must be signed and/or initialed by the parent, the athlete and/or a physician.
3. All forms included in Part I must be completed, signed and returned to the site Athletic Director prior to any participation in any team activities or any involvement with team coaches.
4. Part II is a complete explanation of the policies and expectations which the parent and athlete are responsible for and which must be adhered to as indicated by signatures on Part I.
- 5. It is highly recommended that the parent and the athlete read the explanations of Part II prior to signing the contracts contained in Part I to ensure complete understanding of expectations and consequences.**
- 6. Part II should be retained for future reference by the parent and athlete.**
- 7. Return pages 3-17 to the site Athletic Director when completed.**
- 8. Contact site Athletic Director if there are any questions.**

### **The following is very important**

1. All paperwork must be completed and signed by parent and athlete where indicated.
2. All paperwork must be returned to and cleared by the site Athletic Director
3. Final clearance for team participation is a Clearance Card issued by the Athletic Director
4. The athlete takes the Clearance Card to the coach
- 5. There will be NO PRACTICE or TEAM CONTACT prior to the issuing of the Clearance Card by Athletic Director**

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## **Part I: Athletic Clearance Forms**

### **Athletic Clearance Location Index of Required Forms**

#### **Part I: Clearance Forms**

Page 3 Residential /Transfer Eligibility - **Parent signature required**

Page 4 Clearance Signature Form – **Multiple signatures required**

Page 5 Voluntary Activities /Assumption of Potential Risk – **Parent/Student signatures required**

Page 6 Athletic Permission and Insurance Declaration Forms – **Parent/Student signatures required**

Page 7 Non-District Transportation Notice – **Parent signature required**

Page 8 Field Trip by Private Vehicle, Insurance Information – **Parent signature required**

Page 9 Tax Deductible Player Donation

Page 10 Athlete Personal Conduct - **Parent/Student signatures required**

Page 11 Athletic Pre-Physical Evaluation Form – **Parent/Student signatures required**

Page 12 Physician Physical Form – **Completed by Physician/Physician signature required**

Page 12 Concussion Information Sheet – **Parent/Student signatures required**

Page 15 EKG or ECG Release Form – **Parent signature required**

Page 17 Emergency Care Card Instructions – **Parent signature required**

**PLEASE CUT AND FOLD EMERGENCY CARD AS PER INSTRUCTIONS ON PAGE 15 AND INCLUDE WITH THE OTHER COMPLETED FORMS**

### **RETURN ALL REQUIRED FORMS TO THE ATHLETIC DIRECTOR**

1. Complete and sign all contracts and forms included in Part I
2. Return all signed paperwork to the Athletic Director for review
3. The athlete must receive a Clearance Card following packet review from the Athletic Director
4. Take this Clearance Card and cleared Emergency Care Card to your coach
5. Athlete is now cleared to join all team activities and have contact with coaches

**THERE WILL BE NO TEAM OR COACH CONTACT UNTIL ACCEPTANCE OF CLEARANCE CARD FROM THE ATHLETIC DIRECTOR BY THE COACH**

### **Part II: Policy and Contract Explanations and Review Index**

Pages 17-18 District Substance Abuse Policy

Pages 19-20 Parent and Athlete Code of Conduct Policies Pages 21-24 Academic Eligibility Policy

Page 25 CIF Eligibility Policies

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## **Residential (Transfer) Eligibility**

**ALL STUDENTS ON EVERY TEAM MUST ANSWER THE FOLLOWING QUESTIONS  
BY CIRCLING YES OR NO**

### **All Students:**

Have you ever attended another high school other than the one you are now attending ?

Yes    No

Are you a Foreign Exchange student?

Yes    No    If yes, list the country you are visiting from: \_\_\_\_\_

*If either or both questions were answered with YES, it is very important that this information be brought to the attention of the Athletic Director immediately. There are a series of forms that must be completed for athletic eligibility*

*A YES answer may involve a problem with current eligibility resulting in the athlete being declared ineligible for the upcoming season or year. See the Athletic Director immediately*

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Athlete Signature**

\_\_\_\_\_  
**Date**

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**The Santa Cruz City School District has established certain requirements for student-athletes, the most important of which are listed below. Parents/legal guardians of student athletes are requested to indicate that they have read and understand these requirements by initialing the box next to each item.**

### Parent/Guardian's Initials Required

1. **RESIDENTIAL ELIGIBILITY** Have you ever attended another high school? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes: Name and address of high school attended: \_\_\_\_\_

2. **PHYSICALS:** All athletes are required to have on file in the Athletic Office proof of an **annual physical examination** which clears the athlete for participation in interscholastic sports. No Athlete shall practice or play for any team without a current physical exam. **Initial Required** \_\_\_\_\_

3. **INSURANCE:** All athletes are required to have on file in the athletic office proof that either they are covered through their parent or Guardian's insurance, or that they have purchased voluntary student accident insurance. If voluntary insurance is purchased, the Application envelope must be turned into the coach or athletic director. No athlete shall practice or play for any team without insurance. **Initial Required** \_\_\_\_\_

4. **ATHLETIC PARTICIPATION PERMISSION FORM:** All athletes must have on file in the athletic office an Athletic Participation Permission Form, signed by the athlete's parent or guardian. No athlete shall practice or play without a signed Athletic Participation Permission Form on file. **Initial Required** \_\_\_\_\_

5. **ACADEMIC ELIGIBILITY:** To be academically eligible to participate in interscholastic athletics, all student athletes must:

a. be passing at least 25 semester units, or 12.5 quarter units

b. be achieving a minimum GP A of 2.0

c. be passing at least 5 classes; and

d. be making minimum progress towards graduation

- Quarter grades shall be used at the quarter and semester grades at the semester.
- Summer school grades may be used in addition to the spring semester grades to determine fall eligibility.
- College classes used for athletic eligibility must be approved by the principal prior to season of participation.
- For detailed information on Academic Eligibility and CIF Eligibility Rules, please refer to the school website's athletic page, or Santa Cruz City Schools Board Policy, AF 6145. **Initial Required** \_\_\_\_\_

6. **SPORTSMANSHIP/CODE OF CONDUCT:** The highest degree of sportsmanship is expected of athletes at all times. If any athlete is ejected from pre-season or league contest as a result of flagrant misconduct or unsportsmanship behavior, he/she will be disqualified from participating in the next scheduled contest. If the ejection occurs in a CCS/CIF playoff contest, the athlete will be disqualified from all future contests in that sport for the duration of the playoffs. In addition, good sportsmanship is expected at all practices and consequences for unsportsmanlike behavior during practice will be dealt with at the coach's discretion. **Initial Required** \_\_\_\_\_

7. **ILLEGAL SUBSTANCE POLICY** Any Santa Cruz City School student who uses, possesses, sells or otherwise furnishes any controlled substance, alcoholic beverage, intoxicant or tobacco product while at school or under the jurisdiction of the school is subject to the regular and established consequences of the California Education Code, SCCS Board Policy and the rules and regulations of the SCCS schools and athletic programs. **Initial Required** \_\_\_\_\_

**FIRST VIOLATION** will result in: (1) a one (1) to five (5) day school suspension; (b) referral to a school-based intervention program; and (c) a three (3) week contest ineligibility (attendance at practices and games is expected to be continued after the school suspension ends).

**SECOND VIOLATION** anytime during the athlete's high school career will result in suspension from participation in all interscholastic athletics for one calendar year (365 days).

8. **TRANSPORTATION** Whenever transportation is provided by the school, all athletes must ride both to and from the event on the provided transportation. If an athlete wishes to drive home with his/her parents, he/she must have the prior approval of the coach. Parents may drive athletes if they have their own insurance; the district insurance does not cover parents. Athletes may drive themselves with their coach's permission if the students have their own insurance, but they may not drive other students. The district insurance does not cover student-drivers either. The Non-District Transportation Form must be completed and signed. **Initial Required** \_\_\_\_\_

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## **Voluntary Activities Participation Form Acknowledgement Assumption of Potential Risk**

I authorize my son/daughter \_\_\_\_\_ to participate in the District sponsored activities of \_\_\_\_\_.

I understand that these activities, by their very nature, pose the potential risk of serious injury/illness to individuals who participate in such activities.

I understand and acknowledge that some of the injuries/illness which may result from participating in these activities include, but are not limited to the following:

- |                              |                          |
|------------------------------|--------------------------|
| 1. Sprains/strains           | 6. Paralysis             |
| 2. Fractured bones           | 7. Loss of Eyesight      |
| 3. Unconsciousness           | 8. Communicable Diseases |
| 4. Concussion                | 9. Death                 |
| 5. Head and/or back injuries |                          |

I understand and acknowledge that participation in these activities is completely voluntary and as such is not required by the District for course credit or for completion of graduation requirements.

I understand and acknowledge that in order to participate in these activities, I and my son/daughter agree to assume liability and responsibility for any and all potential risks which may be associated with participation in such activities

I understand and acknowledge that in order to participate in these activities, I am required to have my own medical and accident insurance for my son/daughter, and certify that I do have such insurance.

I understand and acknowledge and agree that the District, its employees, officers, agent, or volunteers, shall not be liable for any injury/illness suffered by my son/daughter which is incident to and/or associated with preparing for and/or participating in this activity.

I acknowledge that I have carefully read this **VOLUNTARY ACTIVITIES PARTICIPATION FORM** and that I understand and agree to its terms.

\_\_\_\_\_  
Parent/Guardian Signature      Date

\_\_\_\_\_  
Student Signature      Date

\_\_\_\_\_  
Medical Insurance Carrier

\_\_\_\_\_  
Policy #

\_\_\_\_\_  
Address

**A signed VOLUNTARY ACTIVITIES PARTICIPATION FORM must be on file with the District before a student will be allowed to participate in the above extra-curricular activities.**

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## Medical Insurance Verification Form

**Please complete Sections A, B and C**

### A. Athletic Permission Slip

It is required by state law that your son/daughter be covered by an insurance plan prior to receiving uniforms and beginning practice. Before insurance of a uniform to a student by a Coach, this permission slip must be signed by a parent or guardian and returned to the Athletic Director or Coach.

I give permission for my son/daughter, \_\_\_\_\_ to participate in after-school sports on an interscholastic team at \_\_\_\_\_ High School. I fully understand that the student must carry a minimum of \$1,500 medical insurance in order to play, per CA Education Code.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

### B. Insurance Coverage for Student Injuries

Santa Cruz City Schools does not provide medical insurance coverage for student accidents. You are responsible for the medical bills if your child gets

hurt during school activities. The student accident/health insurance plans described below are offered to help you pay those bills if you do not have family medical insurance that covers your child or if you desire to supplement your primary medical insurance.

Many coverage options are available. The Student Accident and Sickness and High Option 24-Hour Accident plans are recommended for those students with no other insurance because they provide the most coverage when injuries occur. Student Health Care covers illness as well as injury, 24 hours a day. We recommend the high option plans for students participating in interscholastic sports. If your child does have other health coverage, student insurance may also be used to help pay those charges not covered by other insurance (i.e. deductibles and co-payments). Also, the student insurance plans allow you to take your child to any doctor or hospital you choose. Informational brochures are available from the Athletic Director and on the school website. Please read your brochure carefully. **If you have any questions, please call the plan administrator, Myers-Stevens & Toohey & Co., Inc. at 800/827-4695 or 949/348-0656.** Bilingual representatives are available for parents who need assistance in Spanish.

**To document that you have been notified of this matter, please initial below even if you do not plan to enroll in the program.**

As the parent/guardian of \_\_\_\_\_, I understand that Santa Cruz City Schools does not provide medical insurance for student injuries, but does make voluntary student insurance available. I have received the information on this program. **Initial required** \_\_\_\_\_

I **will** enroll my child in the Myers-Stevens & Toohey voluntary student insurance program. **Initial Required** \_\_\_\_\_

I **will not** enroll my child in the Myers-Stevens & Toohey voluntary student insurance program. **Initial required** \_\_\_\_\_

### C. Insurance Options for Student Athletes

The Education Code requires that every student participating in interscholastic sports have accident insurance with a minimum coverage of \$1,500 for hospital and medical expenses. **Santa Cruz City Schools does not provide insurance for pupils participating in interscholastic athletic activities.** Students have the option of purchasing student accident insurance at individual rates through Myers-Stevens & Toohey & Co., Inc. The plans are explained in detail in the brochure provided by the company. Brochures are available from the Athletic Director, in the school administration office, and on the school website.

The insurance requirement may be satisfied by selecting one of the following options. **Please initial the box next to your choice:**

**1. Personal Insurance Coverage** through a family insurance plan. My family insurance plan provides at least \$15,000 in medical benefits for family members participating in interscholastic sports, and specifically for family members participating in Tackle Football, Touch Tackle Football or Powder Puff Football.

Medical Insurance Carrier

Policy Number

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## 2. Myers-Stevens & Toohey Voluntary Student Insurance Plans:

### A. For sports other than football for both boys and girls:

There are three options within each of the Myers-Stevens & Toohey Plans below: High Option, Mid Option, Low Option

1. School-Time Plan
2. 24-Hour Accident Plan
3. Student Accident and Sickness Plan
4. Dental Accident Plan: May be purchased separately or in conjunction with any of the above plans

### B. For Tackle Football Only

(Please see Myers-Stevens & Toohey brochure for additional information – Available from Athletic Director and at Site Website)

### C.

**THIS FORM MUST BE SIGNED AND RETURNED TO THE COACH OR ATHLETIC OFFICE BEFORE THE ATHLETE CAN PARTICIPATE IN ANY PRACTICES OR GAMES**

---

(Please Print)   Student's Last Name                      First Name                      Student #

I HAVE RECEIVED, READ & UNDERSTAND THE ABOVE INFORMATION REGARDING INSURANCE REQUIREMENTS FOR STUDENT ATHLETES

---

Parent/Guardian Signature

Print Name

Date

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## **Santa Cruz City Schools Non-District Transportation Notice**

The undersigned hereby acknowledges and understands that the District is **NOT** providing transportation to school-sponsored activities and that it is the responsibility of the undersigned to arrange for transportation.

As parent/legal guardian, I hereby authorize and give permission for my child:

\_\_\_\_\_ (child's name),

to drive himself/herself (if the student is a licensed driver) or to ride as a passenger in a vehicle driven by a parent or another adult over 21 years of age, but not another student, to and from school-sponsored activities during the time period beginning \_\_\_\_\_, 20\_\_ and ending \_\_\_\_\_, 20\_\_ .

This authorization will remain in effect throughout the above period unless revoked in writing.

The undersigned acknowledges and understands that the driver is not driving on behalf of or as an agent of the District. Further, the undersigned understands that the District has not verified the driving record of the driver or the mechanical condition of the vehicle.

**As stated in California Ed Code Section 35330, I understand that I hold the Santa Cruz City School District, its officers, agents and employees harmless from any and all liability or claims, which may arise out of or in connection with my child's participation in this activity. The undersigned assumes full responsibility for an risk for bodily injury, death or property damage arising out of the participant's participation in the above activity.**

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date



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## Field Trip by Private Vehicle Declaration of Employee / Parent / Volunteer

### Driver of any SCCS High School Student

The undersigned acknowledges that the purpose of this Declaration is to establish the primary liability and responsibility of the undersigned driver for any and all claims arising out of undersigned driver's transportation of Santa Cruz City Schools students to and from school-sponsored and supervised activities.

NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

DRIVERS LICENSE # \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

DRIVING RESTRICTIONS \_\_\_\_\_

YEAR & MAKE OF AUTO \_\_\_\_\_

VEHICLE LICENSE# \_\_\_\_\_

INSURANCE CARRIER LIABILITY LIMITS \_\_\_\_\_

AGENTS NAME & PHONE \_\_\_\_\_

POLICY # EXPIRATION DATE OF POLICY \_\_\_\_\_

If you drive your personal automobile while on school business and you are involved in an accident, by law, your own insurance policy is used first. The District liability policy would be used only after your liability policy limits have been exceeded. The District does not cover, nor is it liable for, comprehensive and collision coverage to your vehicle.

The undersigned certifies that the above information is correct and that the insurance coverage is in force. The undersigned understands that he/she must have liability insurance coverage in force and agrees to advise the District, in writing, of any changes in the above information. Minimum coverage requirements as set by the State of California:

Public Liability - Bodily Injury- \$15,000 / \$30,000; Property Damage - \$10,000

The undersigned understands that California law requires that each passenger be provided with a seat belt and that seat belts are worn by all passengers at all times. The undersigned further agrees that the passenger capacity of his/her vehicle, determined by the number of seat belts, will not be exceeded. In no event shall more than 9 passengers plus the driver ride in the vehicle at any time. If your vehicle is equipped with air bags, it is suggested that, whenever possible, children in grades K-6 be seated in the back seat(s) only.

The undersigned certifies that he/she is not a registered sex offender.

The undersigned agree not to transport a student on a field trip without the prior written permission from the parent/guardian of the student. That written permission shall be in the possession of the site administrator and/or the site Athletic Director.

\_\_\_\_\_ Date \_\_\_\_\_

(Owner of Vehicle Signature)

\_\_\_\_\_ Date \_\_\_\_\_

(Driver Signature)

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### **Athletic Department Donation Information**

Santa Cruz City School's athletic program is offered free of charge to all students. As a result of the downturn in the economy, the athletic program has suffered deep budget cuts in recent years. Each team is now fully responsible for the costs of uniforms, equipment, coaches' stipends, tournament fees, and much more. The projected cost associated with the planned activities for the school year will be presented at scheduled parent and team meetings. It is estimated that two thirds of the students at each site will directly benefit from participating in athletics.

In order to support and continue to have an athletic program, the anticipated cost of participating in athletics would be funded by means of fundraising or through voluntary donations. The actual cost per athlete to organize and manage a team are available at scheduled parent and team meetings held prior to the start of the season's activities.

Student participation in the sport is NOT based on the donation made, and is NOT required to participate in any school sport. If a team does not raise the funds needed to cover all of its expenses - either through voluntary donations or fundraising – the team will not be allowed to operate or it shall have to modify and scale back on its activities.

Each team must complete an annual budget to show it has adequate resources to operate. District policy requires all teams to remain in good financial standing.

Harbor High School  
300 La Fonda Avenue  
Santa Cruz, CA 95062  
(831) 429-3810  
AD Steve Kopald

Santa Cruz High School  
415 Walnut Ave  
Santa Cruz CA 95060  
(831) 429-3960 Ext 308  
AD Eric Redding

Soquel High School  
401 Old San Jose Road  
Soquel, CA 95073  
(831) 429-3950  
AD Stu Walters

Branciforte Middle School  
315 Poplar Avenue  
Santa Cruz, CA 95062  
(831) 429-3883, (831) 247-9224  
AD Bill Munro

Mission Hill Middle School  
425 King Street  
Santa Cruz CA 95060  
(831) 429-3860  
AD Lawan Milhouse

**Your donation is tax deductible as a charitable contribution to an educational organization, as defined by the Internal Revenue Code Sections 170(a) and (b)(1)(A)(ii).**

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## **Athlete Code of Conduct**

**All athletes and parents will be held accountable for their behavior at all practices, games and other team functions**

1. Athletes are respectful towards their teammates, coaches, opponents, fans and officials.
2. Athletes play by all the rules of the game at all times.
3. Display good sportsmanship
4. Respect officials and the integrity of the game
5. Avoid profanity, vulgarity, rowdy behavior, and obscene actions at all times
6. Athletes set an example of good citizenship.
7. Athletes help promote school spirit and all athletes should strive to be positive leaders in school activities.
8. Athletes show respect for teachers and fellow students.
9. Athletes will participate to the best of their ability in all classroom activities
10. Abide by all school rules and policies related to discipline
11. If suspended from school, the student is suspended from participation
12. Referrals from class may result in suspension of right of participation
13. Two suspensions in a year will terminate athletic participation
14. Athletes represent their team, school and community.
15. Athletes should be conscious of their appearance, manners, and behavior at all times.
16. Athletes are expected to make good and sound decisions
17. Athletics mean more than competition between individuals or teams
18. It is a means of learning the lessons of life.
19. Winning and losing are a part of competition and should be handled with modesty in victory and graciousness in defeat.
20. All athletes are expected to follow district and state guidelines for sportsmanship at all times.
21. As athletes are held to a higher standard, the Athletic Director has the discretion to take disciplinary action above and beyond the administration discipline action.
  - a. Discipline consequences administered by the Athletic Director is applicable to all district and site rules and regulations.
  - b. This type of disciplinary action by the Athletic Director is applicable to all of the items listed in the Athlete Personal Conduct Code on this page.
  - c. This disciplinary action may result in game and practice suspensions.

**TRUST      RESPECT      RESPONSIBILITY      FAIRNESS      CARING      CITIZENSHIP**

Athlete Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

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## Pre-Physical Information Sheet

**To Be Completed by Parent / Guardian**

Student Name \_\_\_\_\_

Age \_\_\_\_\_ Grade \_\_\_\_\_ Activity \_\_\_\_\_

**Place a check by any questioned answered yes**

- \_\_\_\_ 1. Are you under a doctor's care for any reason?
- \_\_\_\_ 2. Have you ever been hospitalized?
- \_\_\_\_ 3. Have you ever had surgery?
- \_\_\_\_ 4. Are you currently taking any medication, inhalers or pills?
- \_\_\_\_ 5. Do you have any allergies? (bee stings, medicines, etc)
- \_\_\_\_ 6. Have you ever been dizzy or passed out during or after exercise?
- \_\_\_\_ 7. Have you ever had chest pains during or after exercise?
- \_\_\_\_ 8. Have you ever had high blood pressure?
- \_\_\_\_ 9. Have you ever been told you have a heart murmur?
- \_\_\_\_ 10. Have you ever had racing of your heart or skipped heartbeats?
- \_\_\_\_ 11. Have you ever had a head injury?
- \_\_\_\_ 12. Have you ever been knocked out or unconscious?
- \_\_\_\_ 13. Have you ever had a seizure?
- \_\_\_\_ 14. Have you ever had a stinger, burner or pinched nerve?
- \_\_\_\_ 15. Have you ever been dizzy or passed out in the heat?
- \_\_\_\_ 16. Do you have trouble breathing or coughing during or after exercise?
- \_\_\_\_ 17. Do you have any skin problems such as rashes, itching, etc?
- \_\_\_\_ 18. Do you have any problems with your eyes or with your vision?
- \_\_\_\_ 19. Do you wear contacts, glasses or protective eye wear?
- \_\_\_\_ 20. Do you use any special equipment such as splints, neck rolls, mouth guards, etc?
- \_\_\_\_ 21. Has anyone in your family died of heart problems or sudden death before age 50?
- \_\_\_\_ 22. Do you have only one working organ of usually paired organs (kidneys, eyes, etc)?
- \_\_\_\_ 23. Have you ever sprained, broken, dislocated, or had repeated swelling of any bones or joints?

**If answered yes to the above question, please circle which of the following is applicable**

Head   Neck   Chest   Shoulder   Back   Hand   Wrist   Elbow   Forearm   Hip   Thigh   Knee  
Ankle   Shin   Calf   Foot

**IF YOU CHECK YES TO ANY OF THE QUESTIONS LISTED BELOW, PLEASE PROVIDE A COMPLETE EXPLANATION ON THE REVERSE SIDE OF THIS PAGE.**

- 1. Do any of the injuries circled in the last question currently bother you?
- 2. Do you have any other medical problems such as asthma, mono, diabetes, etc?
- 3. Have you had any medical injuries or problems since your last medical evaluation?
- 4. Any special instructions or precautions the school and coaches should be aware of?
- 5. What was the date of your last tetanus shot? \_\_\_\_\_
- 6. Do you use any tobacco products?
- 7. **WOMEN ONLY** - Are you having irregular periods?

I/We hereby state that to the best of my/our knowledge, the answers are correct. I/we understand that by performing this examination, the undersigned physician does not assume responsibility for the medical care of this individual.

**Athlete Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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## Pre-Participation Physical

**To Be Completed by Physician**

Athlete's Name \_\_\_\_\_ Date \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ BP \_\_\_\_\_ / \_\_\_\_\_ Pulse Rate \_\_\_\_\_ Vision: Right 20/ \_\_\_\_\_

Vision Left 20/ \_\_\_\_\_ Corrected

Medical	Normal	Abnormal
Skin		
Eyes / Ears / Nose / Throat		
Lymph Nodes		
Heart		
Pulse		
Lungs		
Abdomen		
Genitalia (Males Only)		
Musculoskeletal	Normal	Abnormal
Neck		
Back		
Shoulder / Arm		
Elbow / Forearm		
Wrist / Hand		
Hip / Thigh		
Knee		
Leg		
Ankle / Foot		

\_\_\_\_\_ Cleared for All Activities    \_\_\_\_\_ Not Cleared for All Activities Due to \_\_\_\_\_

Physician Name \_\_\_\_\_ Physician Signature \_\_\_\_\_ Date \_\_\_\_\_

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## **Santa Cruz City Schools Concussion Information Sheet**

A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, all concussions are potentially serious and may result in complications including pro- longed brain damage and death if not recognized and managed properly. In other words, even a “ding” or a bump on the head can be serious. You can’t see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

### **Symptoms May Include One or More of the following**

Headaches	Amnesia	“Pressure in Head”	“Don’t Feel Right	Sadness
Nausea	Vomiting	Neck Pain	Fatigue or Low Energy	Irritability
Balance Problems	Dizziness	Nervousness/Anxiety	Blurred or Double Vision	FuzzyVision
Sensitivity to Light	Emotional	Sensitivity to Noise	Confusion	Groggy / Fuzzy
Drowsiness	Concentration Issues		Forgetfulness	
Change in Sleep Patterns		Repeating Questions	Repeating Comments	

### **Signs Observed By Team Mates, Parents and Coaches May Include:**

Appears Dazed	Vacant Facial Expressions	Confused about Assignments
Forgets Plays	Unsure of Game, Score,	Unsure of Opponent
Moves Clumsily	Coordination Issues	Answers Questions Slowly
Slurred Speech	Behavior Changes	Personality Changes
Unsure of Previous Events	Unsure of Events after Incident	Seizures / Convulsions
Loss of Consciousness		

# Santa Cruz City Schools Athletic Clearance Packet

**Harbor High      Santa Cruz High      Soquel High**

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## **What can happen if my child keeps on playing with a concussion or returns too soon?**

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athlete will often under report symptoms of injuries. And concussions are no different. As a result, education of administrators, coaches, parents and students is the key for student-athlete's safety.

## **If you think your child has suffered a concussion**

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. The new CIF Bylaw 313 now requires implementation of long and well-established return to play concussion guidelines that have been recommended for several years:

## **CIF Bylaw 313. Concussion Protocol**

A student-athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at that time for the remainder of the day. A student-athlete who has been removed from play may not return to play until the athlete is evaluated by a licensed health care provider trained in education and management of concussion and receives written clearance to return to play from that health care provider.

(Approved May 2010 Federated Council)

## **Definition of Health Care Provider:**

*The "scope of practice" for licensed health care providers and medical professionals is defined by California state statutes. This scope of practice will limit the evaluation to a medical doctor (MD) or doctor of osteopathy (DO).*

You should also inform your child's coach if you think that your child may have a concussion.

Remember it's better to miss one game than miss the whole season. And when in doubt, the athlete sits out.

For current and up-to-date information on concussions you can go to: <http://www.cdc.gov/> Concussion In Youth Sports

---

Student Athlete Printed Name

---

Student-Athlete Signature

---

Date

---

Parent or Legal Guardian Printed Name

---

Parent or Legal Guardian Signature

---

Date

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*Palo Alto Medical Foundation*

A Sutter Health Affiliate

*Santa Cruz*

## CONSENT AND RELEASE STATEMENT

I request that selected health screening tests be performed for my child by the organization participating in the High School Sports Physical under the auspices of the Palo Alto Medical Foundation (PAMF).

I understand that a cardiac screening for my child will consist of an Electrocardiogram and possible Echocardiogram and that if a parent cannot be personally present for the cardiac screening a parent will be available that day by phone if needed at the following number: \_\_\_\_\_.

I release PAMF and other participating organizations, their agents, and directors, from any or all liability arising from any incident, act of omission or commission which may arise during cardiac screening or other examination/ tests, or from the transmittal or use of the data derived from these tests. I understand that:

- The information derived from all screenings and examinations are preliminary, subject to error, and are not conclusive. No results should be interpreted as eliminating the need for appropriate professional medical care. Screening values do not stand alone and must be interpreted by your personal physician in the context of your medical history.
- The responsibility for initiating any follow-up examination with a physician for suspected abnormalities identified by the health screening is yours alone, not that of any sponsor, participating organization, or the organization listed above, and that your failing to do so as recommended may result in serious consequences or illness.
- The results will not be sent to your private physician; it is up to you to contact your physician with results.

By my signature below, I acknowledge that I have read and understood the above information and I am consenting to cardiac screening for my child.

## PLEASE PRINT

\_\_\_\_\_  
Child's Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Phone

Print Parent's Name \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_



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## Electrocardiogram

### Test Overview

An electrocardiogram (EKG or ECG) is a test that checks for problems with the electrical activity of your heart; translates the heart's electrical activity into line tracings on paper. The spikes and dips in the line tracings are called waves. A natural electrical system causes the heart muscle to contract and pump blood through the heart to the lungs and the rest of the body.

### Why It Is Done

- An electrocardiogram checks the heart's electrical activity. Find the cause of unexplained chest pain.
- Find the cause of symptoms of heart disease, such as shortness of breath, dizziness, fainting, or rapid, irregular heartbeats (palpitations).
- Find out if the walls of the heart chambers are too thick (hypertrophied).  
Check the health of the heart when other diseases or conditions are present, such as high blood pressure, high cholesterol, cigarette smoking, diabetes, or a family history of early heart disease. A Cardiologist will review the electrocardiogram and if needed he will order an echocardiogram.

## Echocardiogram

### Test Overview

An echocardiogram (also called an echo) is a type of test that uses high-pitched sound waves, then bounce off the different parts of your heart. These echoes are turned into moving pictures of your heart that can be seen on a video screen.

If your child does need an Echo done, we will schedule one, free of charge, on one of the following days and times.  
Saturday,

May 19 from 8:00am – 12:00pm Saturday, June 9 from 8:00am – 12:00pm

At our Main Clinic, in the Cardiology department on the fourth floor, the address is:

2025 Soquel Avenue, Santa Cruz, CA 95062

Department Phone: 831-458-5820

Main phone: 831-423-4111

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## **Emergency Care Card**

# Completion of this form is very important and mandatory

This is the contact information for your athlete in case of injury

Please ensure that the information is current and correct

Please follow instructions completely when filling out the following requests for information

**1. Print the following on card stock paper if possible**

**2. Fill out form in ink**

**3. See next page for form**

**PLEASE CUT AND FOLD EMERGENCY CARD AS PER INSTRUCTIONS AND STAPLE TO  
OTHER COMPLETED FORMS**

### **Directions:**

1. Print or obtain copy of Emergency Care Card
2. Fill in all required information
3. Cut along the outside border of the Emergency Care Card
4. Fold Emergency Care Card along the horizontal grey line
5. Clip Emergency Care Card to front page of Part I of the Athletic Packet
6. Return completed packet to the site Athletic Director
7. Obtain Clearance Card from the Athletic Director
8. Take Clearance card and Emergency Care Card to coach

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## 2014-2015

Emergency Care Information
Athletes Name (L, F) _____,
I hereby give my consent for the above student to participate in athletics I authorize the student to participate and be supervised by representatives of the school on team activities. In case this student becomes ill or is injured, the holder of this card is authorized to have the student treated and I authorize the medical agency to render treatment
_____ Parent or Guardian Signature
_____ Date

	Mother	Father	Alternative #1	Alternative #2
Name				
Home Phone				
Cell Phone				
Work Phone				

<b>Medicines:</b>
<b>Allergy Conditions:</b>
<b>Medical Conditions:</b>
<b>Physician's Name</b> _____ <b>Phone #</b> _____

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## **Part II: Policy Contract Explanations and Review**

**Pages 18-19: District Substance Abuse Policy**

**Pages 20-21: Parent and Athlete Code of Conduct Policies**

**Pages 22-24: Academic Eligibility Policy**

**Page 25: CIF Eligibility Policies**

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### **Co-Curricular Activities Substance Abuse Policy**

#### ***Santa Cruz City Schools Policy 6164.2***

**BASIC POLICY:** Because substance abuse is a significant threat to health and to the orderly conduct of the schools, and because athletic coaches and activity advisors have a unique relationship with young people, the Santa Cruz City School has adopted this policy of prevention, intervention, assistance and control for students who participate in co-curricular activities.

#### **PURPOSE OF THIS POLICY:**

1. To emphasize the District's concern for the health of students as it is affected by the short and long term effects of substance abuse.
2. To confirm and support existing state and federal laws which restrict the use of controlled substances.
3. To establish standards of conduct for those who are involved in leadership activities.
4. To provide assistance to students and their families through a school based early intervention program and/or referral to a substance abuse treatment agency.

#### **RULE: Distribution and Sales of Controlled Substances**

Any student who sells or distributes alcohol, marijuana, or any controlled substance while at school or while under the jurisdiction of the school:

1. Will immediately be ineligible for co-curricular activities.
2. Will receive a referral for expulsion in accordance with AR5114 (Suspension and Expulsion).
3. If the student is expelled, the student is ineligible for co-curricular activities for the length of the expulsion.
4. If the student is not expelled but disciplinary action is taken, the student is ineligible for co-curricular activities for ninety (90) school days.
5. NO student shall use or possess alcohol, marijuana, or any controlled substance while at school or any time during the term of this activity.

#### **INTERVENTION POLICIES:**

1. District staff shall intervene whenever students use alcohol or other illegal drugs while on school property or under school jurisdiction.
2. Staff members who have a reasonable suspicion that a student may be under the influence of alcohol or drugs shall immediately notify the principal or designee.

*If the principal or designee, in his/her professional capacity or in the course of his/her employment, knows, observes or suspects that a student may be under the influence of alcohol or drugs, he/she may notify the parent/guardian. (Education Code 44049)*

3. School staff shall not disclose confidential information provided during counseling by a student 12 years of age or older.
4. A school counselor may report such information to the principal or parent/guardian only when he/she believes that disclosure is necessary to avert a clear and present danger to the health, safety or welfare of the student or other persons living in the school community.
5. The school counselor shall not disclose such information to the parent/guardian if he/she believes that the disclosure would result in a clear and present danger to the student's health, safety or welfare. (Education Code 44049, 49602)
6. The following procedures for use or possession shall be followed when any student uses or possesses alcohol or other illegal drugs or paraphernalia while on any school campus or other district grounds; while going to or coming from school; during the lunch period, whether on or off campus and during, while going to, or while coming from a school sponsored activity.
7. Violations shall be cumulative while the student is attending any school in the district, and violations from other school districts may be considered.

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### **a. USE OR POSSESSION**

#### **First Offense –Use:**

- a. The student will be referred to the School Resource Office (SRO) or other police office or deputy if the SRO is not available by the principal or designee
- b. If the student is under the influence of alcohol or other illegal drugs, the student will be suspended for the remainder of the day.
- c. The student will be referred to the Seven Challenges program in lieu of an additional three days of suspension.
- d. If the parent elects to have their child attend the Seven Challenges or similar program, the student will return to school the following day.
- e. If the parent does not choose attendance the Seven Challenges or similar program, the student will be suspended for three (3) days.
- f. Attendance will be taken at Seven Challenges or similar program.
- g. If the student fails to complete Seven Challenges or similar program, the student will be immediately suspended for three (3) days.
- h. The student will be ineligible to compete in extracurricular events, including athletics for a period of ten (10) days
- i. The student will be expected to attend all meetings, practices, or team events that do not interfere with the Seven challenges program

#### **Second Offense -Use:**

- a. The student will be referred to the School Resource Office (SRO) or other police office or deputy if the SRO is not available by the principal or designee
- b. The student will be suspended for a period of five (5) days and referred to county and community based intervention programs at no cost to the district.
- c. The student will be ineligible for all extracurricular activities including athletics for a period of thirty (30) days but will attend meetings, activities and / or practices.
- d. The student will be required to petition the principal or principal designee to return to the activity or team competition or before joining or trying out for any other activity or athletic team.
- e. The student will be required to complete community service hours

#### **First Offense—Possession of alcohol, controlled substance or other paraphernalia:**

- a. The student will be referred to the School Resource Officer (SRO) or other police officer or deputy if the SRO is not available, by the principal or designee.
- b. The student will be referred to the Seven Challenges or similar program in lieu of three days of suspension.
- c. If the parent elects to have their child attend the Seven Challenges or similar program, the student will not be suspended.
- d. If the parent does not choose attendance in the Seven Challenges or similar program, the student will be suspended for three (3) days.
- e. Attendance will be taken at Seven Challenges or similar program.
- f. If the student fails to complete the Seven Challenges or similar program, the student will be immediately suspended for three (3) days.
- g. Before being readmitted to school the student and his/her guardian will meet with the principal or designee.
- h. The student will be ineligible to compete in extracurricular events, including athletics for ten school days.
- i. The student will be expected to attend all meeting or practices of extracurricular activities that do not conflict with Seven Challenges attendance.

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### **Second Offense:**

- a. The student will be referred to the SRO, or other police officer or deputy if the SRO is unavailable, by the principal or designee.
- b. The student will be suspended for five (5) days and referred to county and community based intervention programs at no cost to the district.
- c. The student will be ineligible to extracurricular activities including activities for thirty (30) school days but shall attend meetings and/or practices.
- d. The student will be required to petition the principal or designee to return to the activity or team competition or before joining or trying out for any other activity or athletic team.
- e. The student will be required to complete community service hours.

### **Third Offense:**

- a. The student shall be suspended for five days.
- b. Recommended for expulsion
- c. Referred to a drug treatment program not at district expense.

### **Sales:**

- a. Any student who sells or distributes alcohol, marijuana or any controlled substance while at school or under school jurisdiction shall be suspended for five days and recommended for expulsion.

**(cf.5022 – Student and Family Privacy Rights)**

**(cf.5141 – Health Care and Emergencies)**

**(cf.6164.2 – Guidance/Counseling Services)**

*Teachers, Counselors and administrators are professional people, already trained in working with youth. They should be familiar with legal, sociological, psychological, and medical effects of substance abuse or addiction. It is the goal of this District, through in-service programs, and other educational opportunities, to continually raise staff awareness, understanding and effectiveness in regards to substance abuse.*

**Regulation SANTA CRUZ CITY SCHOOLS**

**Approved: February 23, 2011 Soquel, California**

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## Harbor High      Santa Cruz High      Soquel High

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### Code of Conduct

#### Parent Code of Conduct

##### As a parent of a high school athlete, I will:

1. Be a positive role model through my verbal and physical presence
2. Be a team fan as well as a “my kid” fan
3. Listen and weigh what my athlete says
4. Make every attempt to obtain and understand both versions of a conflict
5. Show respect for players, coaches, spectators from all teams
6. Respect the officials and all of their decisions
7. Work with my athlete ensuring that my instruction is compatible team philosophies
8. Praise and not criticize
9. Support attempts to improve as athletes, students and as a person
10. Gain understanding and appreciation for the rules and structure of the game
11. Recognize and show appreciation of outstanding play by all players
12. Assist athlete in understanding that success has many forms including improvement, skill development and feeling good about their effort win or lose
13. That if I have a concern I will address the issue in an appropriate manner including:
  - a. Proper time (Not at a game or practice – make an appointment
  - b. Following chain of command (Coach, Athletic Director, Administration)
14. Reinforce drug/alcohol, eligibility, conduct, and other policies by:
  - a. Discussing rules and regulations
15. Refrain from use of controlled substances before and during contests
16. Remember that attending a high school event is a privilege and not a right

#### Athlete Code of Conduct

##### Athletic Participation

1. Athletics is **voluntary**.
2. Participation is not required for graduation and thus, being on a sports team is a **privilege** earned.
3. Participation is **not a right**.
4. With that privilege come responsibilities to maintain and meet the established standards created by the Santa Cruz City High School District and the CIF/CCS by laws.
5. Must abide by all Substance Abuse, Eligibility, Class attendance and all team contracts
6. Must be in attendance, on time, and participating to the best of your ability in all classes.

##### Athletics as Part of the Educational Program

1. Athletics are just one of many parts of the educational program that is provided to students.
2. The purpose of a student being in school is to learn and therefore academics are always a priority.
3. Maintaining academic eligibility is the student’s responsibility, not that of coaches or teachers.
4. Besides academic reasons, eligibility may be lost due to poor attendance or accumulating discipline issues outside of the athletic environment.
5. Participation in athletics and being on a team will mean sacrifices.
6. The commitment an athlete makes to his/her team and coach requires that choices be made and priorities kept.

##### Being Part of a Team

1. Athletes learn many skills to play their chosen sport, but the most important skill that must be learned is teamwork.
2. To be successful, every member of the team must work together to make the whole greater than the sum of the parts.
3. Be responsible for all equipment – this is your financial obligation for participation.



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### Athletic Academic Eligibility Standards

#### Philosophy

The top priority of all involved with student athletes will be academic achievement. Part of the student-athlete responsibility is learning how to plan ahead, prioritize and comprehend one's time limitations and responsibilities. When unavoidable conflict exists between athletics and academics, academics must take priority. This implies that the student athlete is responsible for any consequences for missing team activities.

In order for any student to remain eligible for athletic competition, he / she must remain in compliance with all of the following requirements. These requirements involve standards and expectations from CIF, CCS, and SCCS District.

This applies to co-curricular activities, including athletics and cheerleading. These activities are school-sponsored, out of class, administered by a paid or volunteer coach or adult advisor. These activities are authorized by the District and involve student participation on an ongoing basis.

To remain eligible for competition with an athletic team or with the cheerleading squad, an athlete must be in compliance with the following requirements for academic eligibility. These involve CIF, CCS, SCCAL and School standards.

**Entering 8th grade students must have obtained a 2.0 GPA on a 4.0 scale for the final semester grades at the junior high school.**

#### Section A: Posting Eligibility

1. Athletic Eligibility will be determined by grades received at the end of the #1, #2, #4 and #5 six week grading period and each semester for **Soquel (SHS) and Harbor High School (HHS)**.
2. The #3 and #6 six week grading periods will not be used to determine eligibility at **HHS and SHS**
3. Eligibility will be determined at **Santa Cruz High School (SCHS)** at the end of 5 week progress reports #1, #2, #3, #4 and each semester reporting period.
4. Eligibility reports for all student athletes from all three comprehensive high schools (**HHS, SCHS and SHS**) will be posted:
  - a. **On the Wednesday following the end of the #1, #2, #4, and #5 six week grading period**
  - b. **And at the end of each Fall and Spring Semester.**
5. **SCHS** will post eligibility lists on the same day as **HHS and SHS** based on the preceding progress report
6. Eligibility will be determined only by grades posted at the indicated grading periods
7. Grades must be posted within the district computer system
8. Progress reports of **any other type will not be used** to determine eligibility
9. Grade changes, including Incomplete, can only take place at the end of each indicated grading period.
10. Grade changes for **clerical errors** on the part of the instructor may be made prior to the end of the following grading period.
  - a. This grade change may alter a student's eligibility status
  - b. **Turning in late work will not change eligibility status until the following grading period** eligibility checks have been completed
11. An Incomplete grade will be assigned the same value as an F (0 Grade Points) when determining GPA
12. **All discussions of any requested grade changes by an athlete that are tied to eligibility will originate in a meeting the athlete and / or parents and the Athletic Director**
  - a. **This preliminary discussion will not include the teacher.**
  - b. **All discussions regarding teacher's role and the changing of a grade will take place between the teacher and the Athletic Director**

#### Section B: Number of Current Units Required for Eligibility by Semester

1. Every athlete must have earned the following minimum number of units each semester in order to be eligible for participation.
2. Total unit eligibility will be determined by the following schedule:

End of Semester 1	End of Semester 2	End of Semester 3	End of Semester 4
30 Units	55 Units	85 Units	110 Units
End of Semester 5	End of Semester 6	End of Semester 7	
135 Units	180 Units	205 Units	

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1. Or student must have earned at least 60 units during the previous two semesters (Plus summer school)
2. Cabrillo credits may be applied for eligibility and graduation if:
  - a. Credits taken at Cabrillo are only taken during the summer session to be counted toward eligibility
  - b. Credits taken during the normal school year are not offered at the SCCS school site
    1. This class does not count toward the minimum number of classes an athlete must be enrolled at his/her SCCS Site to be eligible (See Section C)

### Section C: Number of Classes required for each grading period

(Due to change in graduation requirements being raised from 220 to 230 in 2011, the following will apply)

1. All eligible **HHS and SHS** 9th, 10th and 11th grade athletes must be enrolled and attending a minimum of six classes on campus to be eligible
2. All eligible **HHS and SHS** 12th grade athletes must be enrolled and attending at least five classes on campus to be eligible
3. All eligible **SCHS** 9th, 10th, 11th, and 12th grade students must be enrolled and attending a minimum of three classes on campus to be eligible

**ROP Classes** must be taken during the normal school day at an athlete's school site in order to count as an on campus class

### Section D: Probation and Ineligibility Status Defined

1. Probation status is considered a warning :
  - a. Student can practice and compete at all team contests and at coach's discretion
  - b. Student must seek academic assistance to manage the eligibility issue
2. Ineligible status indicates that the student athlete cannot play in any team contests
  - a. Student athlete may practice at coach's discretion
  - b. Student must be attending after school tutorials and / or obtain other tutorial assistance
3. Student deemed to be ineligible may regain eligibility only when the next grading period has been posted, provided all eligibility criteria have been met
4. If an athlete is on probation, he/she must meet all eligibility requirements at the end of the next grading period or will be moved to ineligible status

### Section E: Rules and Standards for Eligibility

**\*\*See Item # 9 for SCHS Excel considerations**

1. Standards for eligibility are based on current grade point average, overall grade point average, total units earned by semester, and the presence of F's within current and previous grading periods
2. If the student athlete is above a 2.0 GPA and no F's within a grading period, and meets the total unit requirement by semester, as indicated in Section B, he/she is eligible to practice and compete
3. If a student athlete is below a 2.0 **or** has an F in the current grading period, he/she is on **probation** (See definition in Section D)
4. If the student athlete is below a 2.0 **and** has an F in the current grading period, he/she is ineligible with no probation period (See definition in Section D)
5. If the student athlete has **two or more F's** in the current grading period, he/she is **ineligible** with no probation period
6. If the student athlete **has any combination of being below a 2.0 GPA or a F in any two consecutive grading periods (current and previous grading period)**, he/she will be ineligible. In other words, a student that is on probation for two consecutive grading periods will be ineligible
7. If the student athlete fails to maintain the required number of units as outlined in Section B of this document, he/she will be ineligible with **no period of probation**
8. Transfer students from within the district must meet all eligibility guidelines for SCCS
9. **\*\*Consideration of the Excel Schedule at Santa Cruz High School**
  - a. Any student athlete with a single F will be considered to be ineligible with no probation period b. Student may not compete in games but may practice at coach's discretion

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### **Section F: Eligibility Appeal Process**

1. Each school site will develop an Athletic Appeal Board consisting of the Principal, Athletic Director, Counselor, and any teacher directly involved with any appeal process.
2. The purpose of the AAB is to hear and render decisions regarding all eligibility appeals
3. If an RSP or ELD student becomes ineligible, an IEP or ELRT team will convene to determine if the student's disability or lack of language skills is the cause of the ineligibility. The Athletic Director must be a part of this IEP or ELRT meeting
4. If the ineligibility of the RSP or ELD student is a result of a disability or language issue, the Athletic Appeal Board may reinstate eligibility status under a contract that meets all criteria established by the IEP or ELRT for the student to remain eligible.
5. All other ineligible student athletes are entitled to an appeal process. The appeal can be granted by the Athletic Director or the Principal. The Athletic Appeal Board will meet to determine if there were extenuating circumstances
6. If an appeal is granted, a contract may be established that exceeds the above standards to remain eligible.

### **Section G: Athletic P.E.**

1. Athletic PE is a class that does not meet during the normal school day
2. Participation in the Athletic PE will earn 2.5 credits. No partial credit will be assigned.
3. Athletic PE is graded as a Pass / Fail class
4. A certificated Athletic Director or Administrator must assign grades for the class
5. Grades and credits will be based on satisfactory attendance and participation in all team activities
6. Athletic PE will be considered an elective and does not receive PE credit toward graduation
7. A Pass (P) in Athletic PE is not used in determining GPA eligibility
8. A Fail (F) in Athletic PE is used in determining GPA eligibility
9. Athletic PE is not used in determining the required number of classes described in Section C
10. Freshman cannot take Athletic PE
11. Sophomores may take Athletic PE only in addition to a regular scheduled 10th grade Core PE class

### **Section H: Age Requirements**

1. A student whose nineteenth (19) birthday is on or before June 14th of the previous school year cannot **participate or practice** with any CIF team

### **Section I: Loss of Eligibility**

1. Any athlete that loses their eligibility due to grades, forfeits all rights and privileges to letters, awards and any credit due from an Athletic PE class that he/she may have been otherwise entitled to receive for that sport's season.

### **Section J: Re-Gaining Eligibility**

1. **Individual students will not be declared eligible or off probation until a computer printout of all eligibility reports is generated at the end of each grading period has been completed**
2. **Summer school grades may not necessarily improve eligibility. The following factors are to be considered:**
3. **A summer class can replace a semester class grade only when the summer school class is an exact duplicate to the class taken during the normal school year.**
4. **A summer class will be added to the semester class grades if it is not a duplicate class.**
5. **This additional grade will not eliminate a failed class grade.**
6. **The failing grade must be counted in total GPA in determining eligibility.**

### **Section L: Quitting a Sport**

1. If an athlete quits a team after making that team, he / she will not be eligible for another team until the current season is completed. This will include all post season play by that team.
2. Players must understand that they have made a commitment and should honor that commitment.

# **Santa Cruz City Schools Athletic Clearance Packet**

**Harbor High      Santa Cruz High      Soquel High**

405 Old San Jose Road, Soquel, California

95073 (831) 429-3410 [www.sccs.net](http://www.sccs.net)

## **CIF Eligibility Standards**

### **CIF ELIGIBILITY RULES**

#### **Residential Eligibility**

A student has residential eligibility upon enrollment in:

1. The ninth grade of any CIF high school or;
2. Tenth grade of any CIF high school from the ninth grade of a middle school or
3. Any CIF school as a member of an approved foreign exchange program as outlined by by-law 212.

#### **Changing Schools-Transfers**

A student may have transfer eligibility provided the student is compelled to move from any school to a CIF school due to:

1. **A legal change of residence from one school attendance area to the attendance area of the new school by the parent(s), legal guardian(s) or care giver with whom the student was living when the student established residential eligibility at the prior school or;**
2. **A ruling by the Board of Education of a school district, which has two or more high schools, provided the change of school is not the result of disciplinary actions.**
3. **Students living with caregivers are not automatically athletically eligible.**

#### **Changing Schools-Open Enrollment**

1. Any student transferring under provisions of the SCCS open enrollment policy, other public or private, may be restricted from **Varsity** competition for one year upon transfer to a different school
2. A Hardship Appeal must be completed and submitted based on;
  - 214 transfer rule
  - 205 C 20-semester unit requirement,
  - or 204 change of a semester of attendance.
3. The transfer must be completed during the first 15 days of the new academic year
4. The transfer must not be the result of disciplinary action.
5. The receiving school must certify that no consideration was given to the athletic performance of the student accepting the transfer.

#### **Age Limitations**

1. No student whose nineteenth birthday is attained prior to June 15 shall participate or practice on any team.

#### **Competition on an Outside Team**

1. A student on a high school team becomes ineligible if the student competes in a contest on an “outside” team in the same sport, during the student’s high school season of sport.