PLAINEDGE PUBLIC SCHOOLS

DISTRICT ADMINISTRATION BUILDING
241 WYNGATE DRIVE, N. MASSAPEQUA, NY 11758
(516) 992-7455 FAX (516) 992-7446

Carol Muscarella
Interim Superintendent of Schools

Brian Sacks, CAA
Director Health, PE & Athletics

TRANSFER STUDENT ATHLETIC INTEREST PROFILE

Return this form to Athletic Director, Brian Sacks

PRESENT SCHOOL YEAR: _____ DATE OF TRANSFER INTO PHS: _____

TRANSFER STUDENT'S NAME: _____

PRESENT ADDRESS: _____

WHOM DO YOU LIVE WITH: _____

GRADE: 9 10 11 12 BIRTHDAY _____

DATE/YEAR ENTERED INTO 9th GRADE: _____

WHAT SCHOOL DID YOU TRANSFER FROM: _____

WHAT WAS YOUR ADDRESS WHEN YOU ATTENDED YOUR PREVIOUS SCHOOL?

_____

DID YOU PLAY A SPORT OR SPORTS AT YOUR PREVIOUS SCHOOL?

7th GRADE: NO ___; IF YES, LIST SPORTS/LEVEL _____

8th GRADE: NO ___; IF YES, LIST SPORTS/LEVEL _____

9th GRADE: NO ___; IF YES, LIST SPORTS/LEVEL _____

10th GRADE: NO ___; IF YES, LIST SPORTS/LEVEL _____

11th GRADE: NO ___; IF YES, LIST SPORTS/LEVEL _____

12th GRADE: NO ___; IF YES, LIST SPORTS/LEVEL _____

DO YOU WANT TO PLAY SPORTS DURING ANY GRADE WHILE YOU ARE AT PLAINEDGE?
YES___ NO___

IF YES, PLEASE LIST SPORTS BELOW

_____

PARENT/GUARDIAN'S NAME: _____

EMAIL ADDRESS: _____

CELL NO.: _____

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EMAIL ADDRESS: _____

CELL NO.: _____