

# **Athletic Eligibility**

## ***Required Forms:***

**To be eligible to participate in any athletic program sponsored by the Haliwa-Saponi Tribal School, a student must have on file in the office the following:**

- Athletic Participation Form
- A current physical exam (physicals are valid for one calendar year)
- Transportation Release Waiver
- Proof of insurance

## ***Academic Requirements:***

Students in grades 9-12 who are passing all classes AND have a 2.0 un-weighted grade-point average in the grading period prior to athletic participation are eligible to participate. Student-athletes will be evaluated at each grading period. First semester grades will be used to determine third quarter eligibility and final grades from the previous school year will be used to determine first quarter eligibility. **Eligibility is determined the day report cards are issued.** However, during the course of the quarter, if the principal determines that the student's academic performance is inadequate, the principal may remove the student from the team.

Middle School Students, grades 6-8, will be assessed on learning standards and will not be given numerical grades. MS students who are receiving satisfactory assessments on all "behaviors that support learning" (as listed on the report card) will be eligible to participate each week as determined by the teacher of the middle school on Wednesday afternoon. Any student receiving an assessment other than Satisfactory or better will have to sit out all games from Thursday (the next day) to the next Wednesday (one week's time). Students and parents will be notified by text, e-mail, and/or phone Wednesday afternoon if the student becomes ineligible.

Student-athletes in grades 9-12 must maintain a "C" average (70) or higher in all classes to be eligible without restrictions while on a team. Students who are failing any class are ineligible to try out or are off the team for the rest of the season.

Students who receive a "D" average (60-69) in one class must immediately begin attending tutoring afterschool twice a week with the teacher of that subject and will be ineligible for two games. If at any time a student does not attend tutoring, the student will be dropped from the team. If a student becomes ineligible by having one "D" for a second time within a season, the student is ineligible for four games, and must attend tutoring two times a week.

Students who drop below a C in two classes are ineligible for four weeks of the season. They must attend tutoring three days a week. They may not dress in uniform for games and/or attend away games. They must attend practices. After four weeks the student must have no less than 3 C's out of four classes. If they still have two or more D's they will be removed from the team for the rest of the season. If they have one D they must attend tutoring twice a week and must sit two games.

Students who were not enrolled at the Haliwa-Saponi Tribal School during the grading period prior to athletic participation must submit their grades from the previous school. The above standards apply to those grades.

Students must have been in **attendance for at least 85%** of the previous semester (this includes all absences). **Students must also be in attendance 100% of the school day (arriving by 7:55) to participate in practice or activities (including games) unless the time missed was due to a pre-approved doctor's appointment (supported by a doctor's note).**

Student athletes who are late to school without a legal excuse more than three times during the season will be removed from the team. Students who are suspended from school may not participate in any game during the period they are suspended. Furthermore, if the principal determines that the student's behavior is not what is expected of an ambassador of the Haliwa-Saponi Tribal School, then the principal may temporarily suspend or remove the student from the team. Students who receive after school detention, In-School Suspension, or Out-of-School Suspension will be temporarily suspended from participation on the day assigned and/or throughout the time period until the consequence has been served.

## **Haliwa-Saponi Tribal School**

### ***Athletic Code of Conduct***

*It is a privilege to represent the Haliwa-Saponi Tribal School Athletic Program. This Code of Conduct is designed to assist you in competing at your optimum level as well as give you the structure necessary to succeed later in life. Great athletes perform at their best when they are in peak mental, emotional and physical condition.*

*All athletes and their parents are expected to recognize the need and importance of following our Code of Conduct's rules of behavior. Failure to abide by any of these rules and regulations may result in disciplinary action.*

#### **A. Behavior Expectations:**

1. Demonstrate good sportsmanship/good character on and off the field/court.
2. Refrain from profane or vulgar language.
3. Treat coaches, officials, teammates, spectators and opponents with respect.
4. To attend and remain at all practices and contests unless excused by the coach.
5. Wear or use (and return at season's end) athletic equipment or uniforms issued by the HSTS only for scheduled practices, contests, or when authorized by the coach.
6. Show respect for the property of others.
7. Demonstrate appropriate behavior at all times as a representative of the team, school, and community.
8. Athletes are not to use or be in possession of alcohol, drugs, drug paraphernalia, tobacco products or any other illicit substances. These products are illegal for minors and can create serious health problems.
9. Athletes are not to remain in the presence of illegal use of alcohol, drugs, drug paraphernalia or any illicit substances.
10. Understand, respect, and abide by the HSTS Student Handbook.

\*\*\* Coaches have the prerogative of developing sport specific rules and regulations. Such rules will be equal to or greater than those outlined in the Code of Conduct.

Violations of the above rules and regulations may result in disciplinary action by the coach and/or Athletic Director. Disciplinary actions range from reprimand to dismissal from the team. In cases involving theft or vandalism, the athlete will be required to pay for the replacement of the item or damages.

Out of School Suspension (O.S.S.): If an athlete is assigned O.S.S. they are ineligible to practice or play until they return to school with a minimum of two full game suspensions. \*\*\* 2<sup>nd</sup> offense will result in dismissal from the team.

In-School Suspension (I.S.S.): If an athlete is assigned an I.S.S. by an Administrator, they are ineligible to practice or play on those days they are in I.S.S. They are suspended from playing in a minimum of one game when given I.S.S. \*\*\*2<sup>nd</sup> offense will result in a minimum of a two games suspension. \*\*\*3<sup>rd</sup> offense will result in dismissal from the team.

Violation of rule 8:

1. First violation – suspension from 20% of athletic contests. The athlete can practice but cannot play in games/meets.
2. Second violation – results in suspension from athletic contests for one calendar year.

Violation of rule 9:

1. First violation – suspension from 10% of athletic contests. They can practice but they cannot play in games/meets.
2. Second violation – suspension from athletic contests for a calendar year.

Athletes suspended for violations of Rules 8 or 9 are required to do the following:

1. Complete a research project assigned by the Athletic Director regarding the dangers of alcohol, drugs, drug paraphernalia, tobacco products or any other illicit substances. (Minimum of four pages, typed, double spaced, size 12 font, and normal margins)
2. Attend and participate in all practices.
3. Attend all contests and sit with the team, however, athletes suspended for violations of Rules 8 or 9 will not be permitted to dress for games.
4. Receive additional disciplinary action if there is a failure to comply with the term of the suspension.

Students must have been in **attendance for at least 85%** of the previous semester (this includes all absences). Students must also be in attendance 100% of the school day (arriving by 7:55) to participate in practice or activities (including games) unless the time missed was due to a pre-approved doctor's appointment (supported by a doctor's note). Student athletes who are late to school without a legal excuse more than three times during the season will be removed from the team. Students who are suspended from school may not participate in any game during the period they are suspended. Furthermore, if the principal determines that the student's behavior is not what is expected of an ambassador of the Haliwa-Saponi Tribal School, then the principal may temporarily suspend or remove the student from the team. Students who receive after school detention, In-School Suspension, or Out-of-School Suspension will be temporarily suspended from participation on the day assigned and/or throughout the time period until the consequence has been served."

Miscellaneous:

1. If an athlete elects not to participate in or is not prepared for Physical Education, they are ineligible to play or practice that day.
2. Transportation to contests – athletes ride to contests on the transportation provided by the school. If there is an emergency situation, an exception may be granted by the Director of Athletics.
3. Transportation back to Haliwa-Saponi Tribal School – Only parents/guardians are permitted to "sign their daughter or son out". **Sign out must be in written form and given to the coach prior to the buses departure from the visiting site. Students may not ride back with other students.**
4. All student-athletes must be picked up within fifteen minutes of arrival back to the school from practice or games. Violations of this will result in loss of game time at the next immediate game.
5. Any athlete who is late to school or leaves school early without a legal reason is ineligible to participate or play that day.

It is a privilege to represent Haliwa-Saponi Tribal School in interscholastic athletic competition. By accepting the privilege, the athlete and his/her parents must accept the responsibilities that accompany it. These responsibilities include abiding by all of the rules and regulations set forth here and any additional rules set forth by the coach, administration, and school board.

I acknowledge that I have read and understand the Code of Conduct for participation in Athletics at Haliwa-Saponi Tribal School. I agree to comply with the Code in letter and in spirit.

Signatures:

Parent/Guardian: \_\_\_\_\_ Athlete: \_\_\_\_\_

Date: \_\_\_\_\_

\*\*\*Website pictures- Unless you contact the Athletic Director, it is assumed that you give the athletic Department permission to have your son/daughter's picture on the website. Pictures do not have names attached to them and are used for public relations reasons only.

\*\*\*This form must be signed, dated and returned to the coach on the first day of practice.

Printed:

Parent name: \_\_\_\_\_ Athlete name: \_\_\_\_\_

Date: \_\_\_\_\_ Telephone number: \_\_\_\_\_

#### Athletic Transportation Release Form

As part of the athletic program your child will be transported to a location off school grounds for practices and games, location to be determined by the sport. In addition, there will be times that the team may stop at various venues for meals, depending on the time of day, whether it is a school-night or not, etc.

Date: \_\_\_\_\_

Sport: \_\_\_\_\_

I give permission for my son or daughter, \_\_\_\_\_, to be transported to and from athletic practices and competitions via school bus or school van. I understand that my child must ride the school's transportation to all games but may be signed out by their parent or guardian to travel home. **Students will not be allowed to sign out to ride home with other students currently attending high school.**

My child has permission to ride home with the following parents throughout the season:

\_\_\_\_\_

**Students whose parents give permission for them to drive to practice may do so but other students may not ride with them unless**

**documentation is on file from the parent of the driver as well as the parent of the rider.**

- I give permission for my son or daughter to drive to practice.
- I give permission for the following students to ride with my child to practice:

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- My child has permission to ride to practice with:

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I understand my child must obey all bus safety rules while involved in the athletics program and failure to do so could leave to suspension from riding the bus or van.

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parent signature

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date

## N. C. H. S. ATHLETIC ASSOC. SPORT EXAMINATION FORM

**Patient's Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Sex:** \_\_\_\_\_

*This is a screening examination for participation in sports. This does not substitute for a comprehensive examination with your child's regular physician where important preventive health information can be covered.*

**Athlete's Directions:** Please review all questions with your parent or legal custodian and answer them to the best of your knowledge.

**Parent's Directions:** Please assure that all questions are answered to the best of your knowledge. If you do not understand or don't know the answer to a question please ask your doctor. Not disclosing accurate information may put your child at risk during sports activity.

**Physician's Directions:** We recommend carefully reviewing these questions and clarifying any positive or Don't Know answers.

Explain "Yes" answers below	Yes	No	Don't know
1. Does the athlete have any chronic medical illnesses [diabetes, asthma (exercise asthma), kidney problems, etc.]? List:			
2. Is the athlete presently taking any medications or pills?			
3. Does the athlete have any allergies (medicine, bees or other stinging insects, latex)?			
4. Does the athlete have the sickle cell trait?			
5. Has the athlete ever had a head injury, been knocked out, or had a concussion?			
6. Has the athlete ever had a heat injury (heat stroke) or severe muscle cramps with activities?			
7. Has the athlete ever passed out or nearly passed out DURING exercise, emotion or startle?			
8. Has the athlete ever fainted or passed out AFTER exercise?			
9. Has the athlete had extreme fatigue (been really tired) with exercise (different from other children)?			
10. Has the athlete ever had trouble breathing during exercise, or a cough with exercise?			
11. Has the athlete ever been diagnosed with exercise-induced asthma ?			
12. Has a doctor ever told the athlete that they have high blood pressure?			
13. Has a doctor ever told the athlete that they have a heart infection?			
14. Has a doctor ever ordered an EKG or other test for the athlete's heart, or has the athlete ever been told they have a murmur?			
15. Has the athlete ever had discomfort, pain, or pressure in his chest during or after exercise or complained of their heart "racing" or "skipping beats"?			
16. Has the athlete ever had a seizure or been diagnosed with an unexplained seizure problem?			
17. Has the athlete ever had a stinger, burner or pinched nerve?			
18. Has the athlete ever had any problems with their eyes or vision?			
19. Has the athlete ever sprained/strained, dislocated, fractured, broken or had repeated swelling or other injury of any bones or joints?			
<input type="checkbox"/> Head <input type="checkbox"/> Shoulder <input type="checkbox"/> Thigh <input type="checkbox"/> Neck <input type="checkbox"/> Elbow <input type="checkbox"/> Knee <input type="checkbox"/> Chest <input type="checkbox"/> Hip <input type="checkbox"/> Forearm <input type="checkbox"/> Shin/calf <input type="checkbox"/> Back <input type="checkbox"/> Wrist <input type="checkbox"/> Ankle <input type="checkbox"/> Hand <input type="checkbox"/> Foot			
20. Has the athlete ever had an eating disorder, or do you have any concerns about your eating habits or weight?			
21. Has the athlete ever been hospitalized or had surgery?			
22. Has the athlete had/been: 1. Little interest or pleasure in doing things; 2. Feeling down, depressed, or hopeless for more than 2 weeks in a row; 3. Feeling bad about himself/herself that they are a failure, or let their family down; 4. Thoughts that he/she would be better off dead or hurting themselves?			
23. Has the athlete had a medical problem or injury since their last evaluation?			
<b>FAMILY HISTORY</b>			
24. Has any family member had a sudden, unexpected death before age 50 (including from sudden infant death syndrome [SIDS], car accident, drowning)?			
25. Has any family member had unexplained heart attacks, fainting or seizures?			

26. Does the athlete have a father, mother or brother with sickle cell disease?			
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**Elaborate on any positive (yes) answers:** \_\_\_\_\_

**If additional space is needed attach a separate sheet**

*By signing below I agree that I have reviewed and answered each question above. Every question is answered completely and is correct to the best of my knowledge. Furthermore, as parent or legal custodian, I give consent for this examination and give permission for my child to participate in sports.*

Signature of parent/legal custodian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Athlete: \_\_\_\_\_ Date: \_\_\_\_\_ Phone #: \_\_\_\_\_

Athlete's Name \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ BP \_\_\_\_\_ ( \_\_\_\_\_ % ile) / \_\_\_\_\_ ( \_\_\_\_\_ % ile) Pulse \_\_\_\_\_

Vision R 20/ \_\_\_\_\_ L 20/ \_\_\_\_\_ Corrected: Y N

***Physical Examination (Below Must be Completed by Licensed Physician, Nurse Practitioner or Physician Assistant)***

These are required elements for all examinations			
	NORMAL	ABNORMAL	ABNORMAL FINDINGS
PULSES			
HEART			
LUNGS			
SKIN			
NECK/BACK			
SHOULDER			
KNEE			
ANKLE/FOOT			
Other Orthopedic Problems			

**Optional Examination Elements – Should be done if history indicates**

HEENT			
ABDOMINAL			
GENITALIA (MALES)			
HERNIA (MALES)			

Clearance:  
 A. Cleared  
 B. Cleared after completing evaluation/rehabilitation for : \_\_\_\_\_  
 \*\*\* C. Medical Waiver Form must be attached (for the condition of: \_\_\_\_\_)  
 D. Not cleared for:       Collision                       Contact  
    Non-contact      \_\_\_\_\_ Strenuous      \_\_\_\_\_ Moderately strenuous      \_\_\_\_\_ Non-strenuous

Due to: \_\_\_\_\_

Additional Recommendations/Rehab Instructions: \_\_\_\_\_

Name of Physician/Extender: \_\_\_\_\_

Signature of Physician/Extender \_\_\_\_\_ MD    DO    PA    NP

(Signature and circle of designated degree required)

Date of exam: \_\_\_\_\_

Address: \_\_\_\_\_

Phone \_\_\_\_\_

Physician Office Stamp:
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(\*\*\* The following are considered disqualifying until appropriate medical and parental releases are obtained: post-operative clearance, acute infections, obvious growth retardation, uncontrolled diabetes, severe visual or auditory impairment, pulmonary insufficiency, organic heart disease or Stage 2 hypertension, enlarged liver or spleen, a chronic musculoskeletal condition that limits ability for safe exercise/sport (i.e. Klippel-Feil anomaly, Sprengel's deformity), history of uncontrolled seizures, absence of/ or one kidney, eye, testicle or ovary, etc.)

This form is approved by the North Carolina High School Athletic Association Sports Medicine Advisory Committee and the NCHSAA Board of Directors.

This form is current as of April 2016