



CIF-San Diego Section
3470 College Ave
San Diego, CA 92115
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APPEAL OF CIFSDS COMMISSIONER'S DECISION
OTHER THAN TRANSFER ELIGIBILITY

REVISED FORM 09/30/20

FACSIMILE REQUESTS ARE NOT ACCEPTED; MUST BE MAILED WITHIN 30 DAYS OF THE COMMISSIONER'S DECISION. LATE REQUESTS NOT ACCEPTED.

Please enclose \$150.00 SCHOOL CHECK for administrative costs made payable to CIFSDS.

Date _____

Joe Heinz, Commissioner
CIF-SAN DIEGO SECTION
3470 College Ave
San Diego, CA 92115

Dear Mr. Heinz:

By this letter, _____ (name of school), _____ (name of conference), or _____ (name of athlete) appeal the decision of the CIFSDS dated, _____, which denied athletic eligibility for the following reason(s):

(use additional sheet, if necessary).

The basis of this appeal is (check all appropriate):

- [] Facts discovered subsequent to Commissioner's decision (Statement of Facts to be attached to this appeal application).
[] Misapplication of the facts to the bylaw.
[] Decision based upon inappropriate bylaw.
[] Other (on additional sheet please explain and attach to this appeal application).

Please schedule an appeal hearing in this matter in accordance with CIFSDS procedures at Article 11 of the State CIF Bylaws and CIFSDS Green Book.

Signature of Appellant Printed Name of Appellant Date

The school acknowledges this request for appeal and joins in the request [] yes [] no and will be represented at the hearing [] yes [] no.

Signature of Principal Date

The league/conference acknowledges this request for appeal and join in the request [] yes [] no and will be represented at the hearing [] yes [] no.

Signature of League/Conference President Date