

# Certification Checklist

## Transgender Student-Athlete Eligibility

The CCCAA believes in maximizing competitive opportunity for student-athletes enrolled in our member colleges, especially as it relates to issues of equity, inclusion, and fairness to all competitors. This necessarily includes transgender student-athletes from a legal and ethical standpoint, with the focus of this process in:

1. Inclusion, equity, and fairness for all student-athletes.
2. Competitive fairness for all student-athletes.
3. The health and safety of all student-athletes.
4. Verifying appropriate documentation of the medical treatment by a qualified physician.
5. Determining eligibility dates as they relate to the student-athlete's medical history.
6. Understanding the nature of the unique circumstances to every student-athlete's Request, including the college's commitment to serving their students.
7. Making a link between the features of the Request and the reasonableness of permitting the student to compete in light of their unique set of circumstances.

Colleges should use this form, the requirements of Bylaw 1.11, and the [user's guide](#) found on the Gender Equity page on the CCCAA Website, in establishing eligibility benchmarks for transgender student-athletes capable of competing at this level of intercollegiate competition. With the Athletic Director or Dean in a leadership role, colleges are counseled to create a committee to review these materials and assist the student-athlete in meeting the criteria required for competition.

Please note that student-athletes may choose not to provide such information or take such actions as required to meet the requirements as set forth in Bylaw 1.11.B.1.a or 1.11.B.1.b. As such, they may still attempt to compete under the provisions of Bylaw 1.11.B.2.

Notice to the Student-Athlete (to be provided by the college prior to initiating a Request):

- 1) It is important to understand that this appeal is only for athletic eligibility at a California community college. Continued athletic competition at an NCAA or NAIA institution may not receive the same consideration. If granted for purposes of competition at the CCCAA level, eligibility may not be favorably considered by the NAIA or NCAA and may cause delay or denial of athletic eligibility elsewhere.
- 2) The student-athlete must understand that in pursuing this Request, they must comply

with the provisions of Bylaw 1.11 and Article 7.4 of the CCCAA Constitution and Bylaws. Their signature affirms that they have agreed to comply with the CCCAA Constitution's due process rules and understand the consequences of their later eligibility related to NCAA or NAIA rules.

- 3) The student-athlete must understand that the college, any conference in which the college competes, the CCCAA and all persons related to this Request will keep all information, discussions, and documentation related to the Request and participation confidential, and will limit access to only those who have a professional purpose as part of their involvement. Additionally, all organizations and personnel involved in this Request will confidentially maintain all information about the student-athlete's identity and medical records, including physician's information, provided by any person part as part of this Request and under this policy.

A student-athlete may provide a written statement with this request but is not required to do so for this Request to be approved. The student-athlete may wish to include their personal circumstances in their transition, the role of athletics in that transition and their enrollment and competition at their current college.

The following documentation shall be required prior to the college assessing a transgender student-athlete's eligibility to compete.

From the Student-Athlete's Physician (on the physician's professional letterhead)

- A detailed written narrative by the physician documenting the student-athletes' transition:
  - 1) Intention/status: documenting the student-athlete's intention to transition, or the student's transition status if the process has already been initiated.
  - 2) Treatment/therapy type: documenting prescribed hormonal treatment/therapy and dosage, related surgery, psychological treatment/therapy, and any other medical documentation as related to the student's gender transition and this transgender review.
  - 3) Timeline: documenting all treatment/therapy related to transition, and of all steps in the student-athlete's transition including the exact date when hormonal therapy began.
  - 4) Testosterone: documenting the timeline and measures of the student's levels if a relevant part of the treatment/therapy plan.

From the College

- A brief written acknowledgment from the college's President, confirming their awareness of the student-athlete's request and this process.
- A brief written acknowledgment from the college's Title IX Officer or designee, confirming their awareness of the student-athlete's request and this process and including a reference

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to the college's inclusive non-discrimination and harassment policy.

- ☐ A brief written acknowledgment from the college's senior athletic administrator, confirming their awareness of the student-athlete's request and this process, and including a reference to the athletic program's inclusive non-discrimination and harassment policy.
- ☐ A brief written acknowledgment from the college's athletic training staff or team doctor, confirming their awareness of the student-athlete's request and this process.
- ☐ Supporting information, by any party, to assist the college in this Request and review.

Student's Legal Name (First Middle Last)	Student's Preferred Name (First Middle Last)	Preferred pronouns
Biological Gender on Original Birth Certificate		Gender Student Identifies As of Now
Sport	Men's (Bylaw 1.11.B.1.a) or Women's (Bylaw 1.11.B.1.b)	1st season of sport or 2nd season of sport

By signing, I affirm that I have read and understand the process as outlined above:

\_\_\_\_\_  
Signature of Student-Athlete

\_\_\_\_\_  
Date

By signing, I affirm that I have explained the process and notification to the student as outlined above:

\_\_\_\_\_  
Signature of Athletic Director

\_\_\_\_\_  
Name of Athletic Director

\_\_\_\_\_  
Date

The Request by the above-named student-athlete is (check one)

- ☐ Authorized
- ☐ Not Authorized

The Request is not authorized for the following reasons \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

