

FOR OFFICE USE

\_\_\_\_ Approved  
\_\_\_\_ Disapproved  
\_\_\_\_ Criteria  
\_\_\_\_ Initial

# REQUEST FOR OSSAA HARDSHIP ELIGIBILITY CLARIFICATION --For Student over Age Limit or Requesting Additional Period of Eligibility

Check one:  Overage  Additional Period of Eligibility

Must be completed by the voting delegate or principal of receiving school

Name of Student \_\_\_\_\_ School Attending \_\_\_\_\_

Date of first attendance \_\_\_\_\_ Date enrolled \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Is applicant a legal student in your district? Yes  No  Tuition\_\_ Transfer \_\_ Guardianship\_\_ Other \_\_\_\_\_

School district in which legal address of student is located \_\_\_\_\_

Residence Address \_\_\_\_\_ Home Telephone \_\_\_\_\_

With whom is student living and relationship to that person? \_\_\_\_\_

Student's Height \_\_\_\_\_ Weight \_\_\_\_\_

In which activities does the student participate? \_\_\_\_\_

### List school (s) attended in previous years with corresponding dates and activities in which student participated:

7<sup>th</sup> \_\_\_\_\_  
(Year) (School) (Activities)

8<sup>th</sup> \_\_\_\_\_  
(Year) (School) (Activities)

9<sup>th</sup> \_\_\_\_\_  
(Year) (School) (Activities)

10<sup>th</sup> \_\_\_\_\_  
(Year) (School) (Activities)

11<sup>th</sup> \_\_\_\_\_  
(Year) (School) (Activities)

12<sup>th</sup> \_\_\_\_\_  
(Year) (School) (Activities)

A waiver of the age limit will not be granted at the high school level if the student already has participated in athletics during six different school years, or at the ninth grade level or below, if the student already has participated in athletics during three different school years. An additional period of participation will not be granted if the student was able to attend school continuously and make normal academic progress in each school year.

### Principal or Voting Delegate should initial the following questions prior to sending the request to the OSSAA office.

1. \_\_\_\_\_ I have reviewed the process for requesting a waiver with the family prior to this waiver request being sent to the OSSAA office.
2. \_\_\_\_\_ I have determined that circumstances beyond the control of the student and the student's family prevented the student from making normal academic progress.
3. \_\_\_\_\_ I have attached a written explanation of those circumstances, and documentation that supports this request.
4. \_\_\_\_\_ Signatures of all parties appear on the *Request for Hardship Eligibility Clarification Form*.
5. \_\_\_\_\_ I understand that submission of incomplete or inaccurate information will result in the hardship being denied due to lack of information.
6. \_\_\_\_\_ I understand that submission of incomplete or inaccurate information could cause eligibility to be revoked and could result in the forfeiture of contest(s) in which the student participated and other penalties imposed if deemed necessary.

**Note: Questions not initialed will be viewed as incomplete and may cause the waiver request to be denied due to lack of information.**

Student's signature \_\_\_\_\_ Date \_\_\_\_\_

Parent(s) or legal guardian's signature \_\_\_\_\_

Case submitted by: \_\_\_\_\_ Title \_\_\_\_\_ Telephone \_\_\_\_\_

(Voting Delegate or Principal - PLEASE PRINT)

PRINCIPAL'S OR VOTING DELEGATE'S SIGNATURE \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ SCHOOL ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

(Please provide complete school address on every request.)

**SHOULD THIS HARDSHIP WAIVER REQUEST BE DENIED, DUE PROCESS RIGHTS AND PROCEDURES CAN BE FOUND BY REFERRING TO THE OSSAA ADMINISTRATORS' HANDBOOK UNDER CONSTITUTION SECTION 6.**