ABSENTEE APPLICATION FOR EXEMPTION FROM INDIVIDUAL FORMAT DISTRICT TRIAL



Instructions

This form must be completed in full to apply for an exemption from trialling at a South District School Sport trial. The application must meet the approved criteria as listed in the "Grounds for Absence" section to be considered for selection in our district team competing at a regional trial.

Office Use Only	
Received:	
Approved:	
Notified:	
Filed:	

This form must be received by the district secretariat no later than 48 hours prior to the commencement of the district cross-country, swimming or track and field trial. The district committee reserves the right to refuse late applications.

This form and required supporting documentation must be signed off by your authorised school delegate and emailed our district secretariat: **NAME:** Deb Duane **EMAIL:** scsdsport@redcliffeshs.eq.edu.au

Additional information

Requests for exemption must be accompanied by an email address that can be used to acknowledge receipt of the absentee application form and whether the application has been successful or not successful.

Please note that a successful application for exemption from participating in a district trial does not automatically guarantee selection in our district team participating at the regional trial.

If you are unable to participate in the district trial and want to be considered for selection (and to be invited to join the district team), you must provide a resumé showing your prior sporting achievements in this sport, particularly at the representative level as well as documentation (e.g. medical certificate, invitation to compete at a higher level championship, etc) at the same time with this completed application.

Please type or clearly print in all fields on this form

The state of the s		
Applicant Details		
First name	Last name	
Gender	DOB	
Phone	Email	
District Trial Details		
Name of sport	District trial dates	
Grounds for Absence (Please select your reason be	elow & attach required documents)	
Medical condition on the day(s) of the trial	Include current, valid medical certificate from health professional stating that you are unfit for the competition date(s) and the date when full participation can resume.	
Absence due to a compulsory school activity	Include a letter on official school letterhead signed by your school principal stating your name, the activity, dates of the activity and that you are required to attend the compulsory school activity.	
Absence due to competing at a higher level of competition (state/national/international) in the same sport and same discipline	Include documentation from event organisers that states that you are selected in the team (your name is to appear in the documentation), the event name and dates of competition.	
Absence due to competing with another SCRSS team or QSS team in a different sport.	Include documentation from event organisers that states that you are selected in the team (your name is to appear in the documentation), the event name and dates of competition.	
Bereavement or compassionate reasons	Include a letter on official school letterhead signed by your school principal to support the absence.	
By signing this form, I give permission for district staff to contact me, my parents/carers or staff at my school.	Authorised School Delegate Details	
Applicant Signature	School name	
Date	Delegate name	
Parent/Guardian Name	Email	
Parent Email	Mobile Phone	
Parent Signature	Signature	
Date	Date	