

SWIMMING APPLICATION FOR EXEMPTION – SUNSHINE COAST SCHOOL SPORT TRIAL



Instructions

This form must be completed in full to apply for an exemption from swimming at our regional swimming trial. The application must meet the approved criteria as listed in the "Grounds for Absence" section to be considered for selection in a regional team competing at a Queensland School Sport (QSS) State Championship.

Office Use Only

Received: _____
Approved: _____
Notified: _____
Filed: _____

This form must be received at the Sunshine Coast Representative School Sport office **no later than 24 hours prior to the commencement of the regional trial**. Our office reserves the right to refuse late applications.

This form and required supporting documentation must be signed off by your school principal or authorised school delegate and emailed (sport.scrssb@qed.qld.gov.au) to the Sunshine Coast Representative School Sport office.

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 regional trial does not automatically guarantee selection in a Sunshine Coast Representative School Sport regional team competing at the QRSS State Championship.

If you are unable to participate in the regional trial and want to be considered for selection (and to be invited to join our regional team), you must provide supporting documentation (e.g. medical certificate) at the same time with this completed application.

Swimming exemption application conditions

- For exemption applications, club coach or PE teacher verified times WILL NOT be accepted.
- Primary school students (10-12 years) must have already been nominated by your district via their team nomination process.
- Secondary school students (12-19 years) must have completed the regional online nomination process.
- If a swimmer competes at the regional swimming trial, only results achieved at this regional swimming trial will be accepted. Any previous result will not be accepted or considered from previously swum events.
- Selection preference will be given to students competing at the regional trial.

Nominations to the QRSS state swimming championship

Swimmers from 10-12 district teams

- You can only apply to be exempt for the specific events that you have been nominated to swim at the regional trial by your district.

Swimmers from 13-19 districts (12-19 year olds)

- You can only apply to be exempt for the specific events that you entered on our online nomination form.
- 13-19 year old swimmers can only apply for a maximum of 9 events on this exemption application form, in accordance with QRSS swimming competition procedures.

Please type or clearly print in all fields on page 2 of this form.

Applicant Details

First name	<input type="text"/>	Last name	<input type="text"/>
Gender	<input type="text"/>	DOB	<input type="text"/>
Phone	<input type="text"/>	Email	<input type="text"/>
Name of Sport	Regional Swimming Trial		Year: <input type="text"/>

Grounds for Absence (Please select your reason below & attach required documents)

<input type="radio"/> Medical condition on the day(s) of the trial	<i>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.</i>
<input type="radio"/> Absence due to an authorised school activity	<i>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 authorised school activity.</i>
<input type="radio"/> Absence due to competing in a QRSS event or another sport event of the same or higher level	<i>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.</i>
<input type="radio"/> Absence due to religious and/or cultural responsibilities	<i>Include a letter on official school letterhead signed by your school principal to support the absence.</i>
<input type="radio"/> Bereavement or compassionate reasons	<i>Include a letter on official school letterhead signed by your school principal to support the absence.</i>

Events to be considered

Event	Age division	Result Date	Result	Result Source
				<input type="radio"/> District time <input type="radio"/> Results Central time
				<input type="radio"/> District time <input type="radio"/> Results Central time
				<input type="radio"/> District time <input type="radio"/> Results Central time
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				<input type="radio"/> District time <input type="radio"/> Results Central time

By signing this form, I give permission for RSS staff to contact me, my parents/guardians or staff at my school.

Applicant Signature	<input type="text"/>
Date	<input type="text"/>
Parent/Guardian Name	<input type="text"/>
Parent Email	<input type="text"/>
Parent Signature	<input type="text"/>
Date	<input type="text"/>

Authorised School Delegate Details

School name	<input type="text"/>
Delegate name	<input type="text"/>
Email	<input type="text"/>
Mobile Phone	<input type="text"/>
Signature	<input type="text"/>
Date	<input type="text"/>