



B. This is a request for (check appropriate box[es]):

- A determination as to the student's eligibility
- A waiver of ARTICLE I, Section 1 (Age Rule); ARTICLE III, Section 3 (Attendance Rule); or ARTICLE VIII, Sections 1A and/or 1B (School Years and/or Seasons Limitation), of the PIAA By-Laws.

C. Please attach additional sheet(s) and specify, in narrative form, the situation in question. Where a request is made for a waiver, please specify the reason(s) for such request.

D. Please list the names and titles, addresses, and telephone numbers of all persons who would or could give evidence as the facts in this case.

NAME & TITLE	ADDRESS	TELEPHONE #

**Section 4. Supporting Data/Documents**

Please list and attach to this form copies of 1) transcripts, 2) attendance records and any and all supporting documents such as physician's statements, psychiatric or psychological evaluations, etc.

Supporting data attached is as follows:

- 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_
- 4. \_\_\_\_\_ 5. \_\_\_\_\_ 6. \_\_\_\_\_

I certify that the above is an accurate and complete presentation of the facts in this case and ask the PIAA District Committee that has jurisdiction over the aforementioned school to render a decision in this manner.

\_\_\_\_\_  
(Signature of PIAA Member School Principal)

\_\_\_\_\_  
(Date)

I certify that I have informed the student, and, if the student is under 18 years of age, that student's parent(s) or guardian(s), of my intent to file this request for a decision on athletic eligibility, and have afforded the student, and, where applicable, that student's parent(s) or guardian(s), the opportunity to provide information for this request and documents to be attached to this form.

That opportunity was \_\_\_ exercised \_\_\_ declined by the student and was \_\_\_ exercised \_\_\_ declined by that student's parent(s) or guardian(s).

\_\_\_\_\_  
(Signature of PIAA Member School Principal)

\_\_\_\_\_  
(Date)

Principal's E-Mail Address: \_\_\_\_\_

**NOTE:** If sufficient space is not provided, please attach additional sheet(s) as necessary, identifying which items are answered or continued on such sheet(s).

**DO NOT WRITE BELOW THIS LINE**

A. Date received at PIAA District \_\_\_\_\_ Office: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_.

B. Additional information requested: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_.

C. Additional requested information received at PIAA District \_\_\_\_\_ Office: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_.

D. Forwarded to PIAA District \_\_\_\_\_ Committee for action \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_.

E. Final Decision \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_. APPROVED DENIED (circle one)

F. Summary of PIAA District \_\_\_\_\_ Committee vote: \_\_\_\_\_ ayes \_\_\_\_\_ naves \_\_\_\_\_ abstentions

G. Reason(s) for decision: \_\_\_\_\_

**Please complete the Post-Season Waiver Request form if appropriate.**