

## North Carolina High School Athletic Association

## Request for Waiver

Pursuant to the rule proposed for adoption by the State Board of Education, **16 NCAC 06E .0207 ELIGIBILITY REQUIREMENTS FOR PARTICIPATION IN INTERSCHOLASTIC ATHLETICS** (the "Eligibility Rule"), the NCHSAA shall, in an individual student's case, waive any eligibility requirement contained in the Eligibility Rule upon a petition by the student's PSU and a finding by the NCHSAA that enforcing the requirement:

- (1) Fails to promote academic progress, health, safety, and fair play;
- (2) Works an undue hardship on a student who has lost eligibility due to circumstances that made participation impossible, such as prolonged illness or injury; or
- (3) Prevents the reasonable accommodation of a student's disability, as required by the Americans with Disabilities Act, 42 U.S.C. § 12101 et seq.

To request a waiver, the designated PSU representative must complete the attached form in its entirety and submit it along with any attachments via email to the parties listed below.

## **North Carolina High School Athletic Association**

- Que Tucker Commissioner (que@nchsaa.org)
- Brad Alford Assistant Commissioner of Sports, Championships, and Compliance (brad@nchsaa.org)

<sup>\*</sup> Note that all requests require approval of the superintendent, or designee, of the PSU.

School Information		
School Name		
School Address		
PSU Name (School District		
or Charter Organization)		
School Representative Information		
The Request for Waiver must be completed by a representative of the school, usually the		
principal or athletic director.		
Name		
Title		
Email		
Phone Number		
Student-Athlete Information		
List the name of the individual student-athlete impacted by the Request for Waiver.		
Rule Subject to Waiver Request		
List the rule or part of a rule that the PSU is requesting be waived. Please include the rule		
number from the NCHSAA handbook.		
Basis for Waiver Request		
Select the applicable basis (or b	ases) for the request.	
☐ The rule fails to promote academic progress, health, safety, and fair play.		
☐ The rule works an undue hardship on a student who has lost eligibility due to		
circumstances that made participation impossible, such as prolonged illness or injury.		
☐ The rule prevents the reasonable accommodation of a student's disability, as required by		
the Americans with Disabilities Act, 42 U.S.C. § 12101.		

Factual Background		
Describe the factual background of the request, including specifically why the PSU believes		
that the facts satisfy the selected ground(s) for waiver. The PSU may include additional		
documentation or evidence in addition to the written description.		
Description of the Facts		
Summary of Attached Evidence		

## **Certification by School Representative**

I hereby certify that, to the best of my knowledge, the information provided in this request is true

accurate, and complete. I understand that the falsi relevant facts in this appeal may result in denial of the	•
Name of School Representative	
Signature	
Date	
Acknowledgement by Superinte	ndent or Head of School
I, on behalf of the PSU named in this request, acknow approve of its submission to the NCHSAA.	vledge that I have reviewed the request and
Name of Superintendent, Head of School, or Designe	ee
Signature	
Date	