

# Colorado High School Activities Association

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## Waiver Form FOR ALL WAIVERS OTHER THAN TRANSFER

School \_\_\_\_\_ Administrator \_\_\_\_\_ Title \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

### STUDENT (subject of waiver request) INFORMATION:

Name \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Current Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Is this in the attendance area of the above school?  Yes  No

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Living With \_\_\_\_\_

Enrollment from (mm/dd/yy) \_\_\_\_\_ to (mm/dd/yy) \_\_\_\_\_

- A. Waiver of CHSAA Bylaws for eligibility can be approved if a hardship exists.** A hardship is defined as "an unforeseen, unavoidable and uncorrectable act, condition or event that imposes a severe, non-athletic burden upon the student or his/her family." Instructions – **Complete Items B, C, D** and forward to the CHSAA office.

### Waiver Description

\_\_\_\_\_ Consecutive/Total Semester (Bylaw 1770.2)

\_\_\_\_\_ Academic (Bylaw 1710.0)

\_\_\_\_\_ Age Exception – *This form must be accompanied with documentation from the federal or state defined disability.*

\_\_\_\_\_ Other (Explanation) \_\_\_\_\_

- B. STATEMENT FROM SCHOOL:** Attach to this form all supporting documents, i.e. doctor's statement, court documents, psychological report, previous school statement, and other letters or statements documenting hardship conditions.

The conditions stated in this waiver regarding this student are, to the best of my knowledge, true and complete.

\_\_\_\_\_ I do \_\_\_\_\_ do not recommend the waiver be granted (attach additional sheets if necessary)

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

(School Athletic Director, Principal or Superintendent)

C. Record of participation (indicate sports played interscholastically at any level FR, SO, JV, V):

Grade	School/Year	Fall	Winter	Spring
9 <sup>th</sup>	_____	_____	_____	_____
10 <sup>th</sup>	_____	_____	_____	_____
11 <sup>th</sup>	_____	_____	_____	_____
12 <sup>th</sup>	_____	_____	_____	_____

D. RECOMMENDATION OF THE LEAGUE (do not consider until all sections and documentation have been submitted):

*The league must vote on all waivers, except academic waivers.*

The \_\_\_\_\_ League has reviewed the conditions of the above named student and voted as follows:  
\_\_\_\_\_ in favor \_\_\_\_\_ not in favor of granting the request.

The League \_\_\_\_\_ does \_\_\_\_\_ does not recommend the waiver of the rule in this case.

Signed (League President) \_\_\_\_\_ Date \_\_\_\_\_

CHSAA OFFICE USE ONLY:

\_\_\_\_\_ Varsity Eligibility Approved                      \_\_\_\_\_ 50% Eligibility                      \_\_\_\_\_ Varsity Eligibility Waiver Denied

Comments:

Signed \_\_\_\_\_ Date \_\_\_\_\_  
CHSAA Commissioner

CERTIFICATION OF APPLICATION: By filling this application for interscholastic eligibility, I specifically authorize any and all of this student's former and current/new high schools to release all records regarding this student and to disclose to the CHSAA representative any information or documentation needed or requested by the CHSAA in making this eligibility determination. I authorize the CHSAA to use that information in making its decision. I understand that the CHSAA may be unable to grant athletic eligibility absent the disclosure of relevant information or documentation from this student's former or current/new high schools. I am authorized to make this request. I affirm that all of the above statements are true to the best of my knowledge. I further affirm that I understand that if subsequent to the approval of this application, it is discovered that this approval was granted under false, erroneous, inaccurate or incomplete information, severe penalties affecting the future eligibility of this student-athlete may result.