## REQUEST FOR WAIVER

Age Requirement and/or Four Year Limitation for Students with Disabilities

SECTION III: TO BE COMPLETED BY THE ATHLETE'S PARENT/LEGAL GUARDIAN				
The signature of the parent indicates their understanding that:  The student's participation in the additional season of athletic competition shall not be scored for the purposes of such competition; Is limited to the non-contact sports of swimming/diving, track/field, gymnastics, cross country, archery, bowling, golf, rifle, and skiing.  The student's participation under this waiver is limited to one year.				
Parent/Guardian Name:				
Parent/Guardian Signature:				
Date:				
SECTION IV: TO B	E COMPLETED BY THE SUPERINTENDENT OF SCHOOLS			
CRITERIA FOR A WAIVER (any item answered in the negative will result in a denial of the waiver):				
Yes 1	No The student has a disability as defined in section 4401 of the Education Law.			
Yes 1	No The student has not graduated from high school as a result of his or her disability delaying his or her education for one year or more.			
Yes 1	No The student is qualified to compete in athletic competition in the sport for which he or she is applying for a waiver.			
Yes 1	No The student has previously participated on the school team for			
Yes 1	the sport for which he or she is applying or a waiver.  The student's participation in this sport will not adversely affect the opportunity of the other students to participate successfully in such competition.			
SUPERINTENDENT'S DETERMINATION:				
Waiver Approved Waiver Denied. Reason for denial:				
Superint	endents Name:Date			
Superintendent's signature:				