



## SEASON LIMITATIONS HARDSHIP PACKET

WIAA Rules 18.0.0-19.0.0

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Many appeals are denied because the student, parents or school do not provide documents to support their claims of hardship, or the claim of a hardship does not meet the basis for a hardship by WIAA rules and regulations. The burden of providing evidence that a hardship exists shall be borne by the student. The eligibility committee will be looking for a direct relationship between the hardship presented and the inability to participate in athletics for 4 consecutive years.

### **Waivers of eligibility regulations shall be considered for:**

- ◆ Extenuating, unique and/or new circumstances
- ◆ Circumstances must be different from those that exist for the majority or even a small minority of students
- ◆ Beyond the student's or where applicable, the parent's or legal guardian's control
- ◆ Not the result of acts or actions by the student or family unit
- ◆ Deemed to have significantly influenced or contributed to the cause of the student's non-compliance
- ◆ Have you ever started a school sports season and not completed it (been removed from a program)? If 'yes', please explain:

### **Eligibility requirements are typically not waived for:**

- ◆ Academic or athletic deficiencies in a school including Running start for private school students
- ◆ Execution and/or decision to transfer was for athletic purposes or motivated by a desire to gain an athletic outcome
- ◆ Circumstances that are the result of acts or actions by the student or family unit
- ◆ Usual maturation problems or family situations
- ◆ Loss of eligibility in itself or an injury
- ◆ Transportation when attending school outside of school of residence

### **There shall be a direct, causal relationship between the alleged hardship and the student's inability to meet the specific eligibility rules:**

- ◆ Time Frame corresponds with indicated hardship
- ◆ Direct correlation between the situation that caused the hardship and the timing of the transfer
- ◆ Circumstances or hardship were not in existence when initial choice was made to attend the school and was not something the family chose or was foreseeable

## Documentation of a Season Limitations Hardship:

- ◆ Documents that demonstrate that hardship has a direct connection to the inability to complete eligibility in 4 years.
  - Medical records
  - IEP / 504 / reports of evaluation
  - Letters from licensed health care providers with diagnosis and treatment.

## Does Not Constitute a Season Limitations hardship:

- ◆ Poor grades
- ◆ Family choice (repeating a grade, non-participation, etc.)
- ◆ Opportunity to participate in 4 years of athletics during high school years

## ATHLETIC HISTORY OF THE STUDENT

**18.15.0:** *Season Limitations: Academic / Athletic History of Participation (10 or more practices or 1 contest)*

Grade	School Year (ie: 2019-20)	School Attended	School Sports - list all (circle the sport if you competed at varsity)	Community / Club Sports List All
7				
8				
9				
10				
11				
12				
12+				

### STUDENT INFORMATION

Student Name: \_\_\_\_\_ School: \_\_\_\_\_

School District: \_\_\_\_\_ Total Credits Required for Graduation: \_\_\_\_\_

Credits Student Has Earned to Date: \_\_\_\_\_ Credits Needed to Graduate: \_\_\_\_\_

Expected Graduation Date (M/D/Y): \_\_\_\_\_ School Schedule:  TRIMESTER  SEMESTER

**18.14.0:** Since entering 7th grade, have you repeated a grade?  Yes  No

**If yes, please explain:**

### FOR STUDENT/COUNSELOR/ADMINISTRATOR

List specific classes/credits student needs to graduate. **STUDENT MUST ATTACH: Complete Full School Year Class Schedule as well as Current Progress/Grades.**

Class	Credit Value
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**Total** (Credits Student is Currently Enrolled In): \_\_\_\_\_

**Plan Monitored By:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Phone Contact:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Date Student Will Complete Requirements (M/D/Y):** \_\_\_\_\_

### SIGNATURES

Athletic Director: \_\_\_\_\_

Principal: \_\_\_\_\_

Advising Counselor: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Student: \_\_\_\_\_

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

*\*By typing your signature, you acknowledge all of the above information to be valid and true*

**STUDENT STATEMENT**

**School:** \_\_\_\_\_

State, in your own words and in detail, what hardship condition exists that has prevented you from complying with the WIAA eligibility regulations. **Please include a clear, concise and detailed timeline of events to demonstrate the relationship between the hardship and your declaration of ineligibility.**

I have attached relevant documents and/or statements (initial): \_\_\_\_\_

Student: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*\*By typing your signature, you acknowledge all of the above information to be valid and true*

STUDENT'S NAME: \_\_\_\_\_

**PARENT STATEMENT**

**Parent/Guardian Name:** \_\_\_\_\_

**School:** \_\_\_\_\_

State, in your own words and in detail, what hardship condition exists that has prevented you from complying with the WIAA eligibility regulations. **Please include a clear, concise and detailed timeline of events to demonstrate the relationship between the hardship and your declaration of ineligibility.**

I have attached relevant documents and/or statements (initial): \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*\*By typing your signature, you acknowledge all of the above information to be valid and true*