**ABSENTEE APPLICATION FOR EXEMPTION FROM WIDE BAY REGION SPORT TRIAL**

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|  | ***Instructions***This form must be completed in full to apply for an exemption from trialling at a Wide Bay School Sport regional trial. The application must meet the approved criteria as listed in the “Grounds for Absence” section to be considered for selection in a regional team competing at a Queensland School Sport (QRSS) State Championship. | **Office Use Only** |
| Received: |  |  |
| Approved: |  |  |
| Notified: |  |  |
| Filed: |  |  |
|  |

This form must be received at the Wide Bay School Sport office no later than 24 hours prior to the commencement of the regional trial. The office reserves the right to refuse late applications.

This form and required supporting documentation must be signed off by your school principal or authorised school delegate and District Secretary and emailed (wbssport@qed.qld.gov.au) to the Wide Bay Representative School Sport office.

***Additional information***

Requests for exemption must be accompanied by an email address that can be used to acknowledge receipt of the absentee application form and whether the application has been successful or not successful.

Please note that a successful application for exemption from participating in a regional trial does not automatically guarantee selection in a Wide Bay Region team competing at the QRSS State Championship.

If you are unable to participate in the regional trial and want to be considered for selection (and to be invited to join the region team), you must provide a resumé showing your prior sporting achievements in this sport, particularly at the representative level as well as documentation (e.g. medical certificate, invitation to compete at a higher level championship, etc) at the same time with this completed application.

**Please type or clearly print in all fields on this form.**

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|  | **Applicant Details** |  |  |  |
|  | First name |  |  | Last name |  |  |
|  | Gender |  |  | DOB |  |  |
|  | Phone |  |  | Email |  |  |
|  | **Regional Trial Details** |  |  |  |  |
|  | Name of Sport |  | Regional Trial Dates |  |  |
|  | **Grounds for Absence (Please select your reason below & attach required documents)** |  |
|  |  | Medical condition on the day(s) of the trial |  | *Include current, valid medical certificate from health professional stating that you are unfit for the competition date(s) and the date when full participation can resume.* |  |
|  |  | Absence due to an authorised school activity |  | *Include a letter on official school letterhead signed by your school principal stating your name, the activity, dates of the activity and that you are required to attend the authorised school activity.* |  |
|  |  | Absence due to competing in a QRSS event or another sport event of the same or higher level |  | *Include documentation from event organisers that states that you are selected in the team (your name is to appear in the documentation), the event name and dates of competition.* |  |
|  |  | Absence due to religious and/or cultural responsibilities |  | *Include a letter on official school letterhead signed by your school principal to support the absence.* |  |
|  |  | Bereavement or compassionate reasons |  | *Include a letter on official school letterhead signed by your school principal to support the absence.* |  |
|  | *By signing this form, I give permission for RSS staff to contact me, my parents/guardians or staff at my school.* |  |  **Authorised School Delegate Details** |  |
|  | Applicant Signature |  |  | School name |  |  |
|  | Date |  |  | Delegate name |  |  |
|  | Parent/Guardian Name |  |  | Email |  |  |
|  | Parent Email |  |  | Mobile Phone |  |  |
|  | Parent Signature |  |  | Signature  |  |  |
|  | Date |  |  | Date |  |  |
|  |  |  |

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| District | District Secretary Name | District Secretary Signature | Date |
|  |  |  |  |