

Wide Bay School Sport Board

ABN:76 337 613 647 North Coast Region Maryborough Office 102 Lennox Street PO Box 142 Maryborough Q 4650

Secretary: Justin Lane Phone: (07) 4122 0874 Email: justin.lane@qed.qld.gov.au

Absentee Application for Exemption From Wide Bay Regional Trial

An athlete who has an approved absence at the time of Regional Trial may be considered for selection in the Regional Team upon completion and approval of this form.

This application will be considered for selection in the regional team after endorsement by School Principal, District Secretary and RSSO.

Please Note: This application does not guarantee your selection in the team. If this application is fully authorised, it is still up to the sport officials to select you into the team on the trial day.

| it is still up to the sport offici | ais to sciect ye | o into the t | cam on the ti | iai aay. | |
|---|------------------|--------------|----------------|------------------|---------------------------|
| Athlete Details | | | | | |
| Name: | Gender: | | | | |
| School: | Date of Birth: | | | | |
| Parent Name: | | | | Parent Contac | ct: |
| Sport: | | | Ye | ear Level: | |
| Date of Trial: | Venue of Trial: | | | | |
| Trial not attending (request | ing considera | tion for) | | | |
| (Medical Certificate Required) | Medical con- | dition on tr | avel and cor | mpetition days | YES NO |
| (Letter from School Principal R | reavement | or compassi | onate reasons | ☐ YES ☐ NO | |
| | | C | Competing at | a higher level | ☐ YES ☐ NO |
| If yes please specify: | | | | | |
| | | Senio | r assessmen | ts in units 1-4 | YES 🗆 NO |
| If yes please specify: | | | | | |
| udent Declaration – By signing t | this application | n, I acknov | vledge that: | | |
| My application may not be Secretary and Regional So | - | | ation is deci | ded individually | by my Principal, District |
| My application must be a | • | | al and Distric | ct Secretary and | submitted to the RSSO 1 |
| (ONE) week prior to the F | Regional Trials | or it will n | ot be consid | ered. | |
| Student Signature: | | | | Date: | |
| arent/Guardian Signature: | | | | Date: | |
| thorisation Step 1 – School Principal | | | Authorisat | ion Step 2 – Dis | trict Secretary |
| Name: | | | Name: | | |
| gnature: | Date: | | Signature: | | Date: |
| uthorisation Step 3 – Regional S | School Sport | Officer | | | |
| ate Received: | Approved: | ☐ YES | □ № | Student Not | ified: |
| ame: | | Sign | ature: | | Date: |