

**Delaware Interscholastic Athletic Association  
Waiver Request Form**

(To be completed by the Principal or the Headmaster of the School)  
ALL INFORMATION SHOULD BE TYPED OR PRINTED

**1. Please provide the following information concerning the student who is requesting the waiver:**

Student's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
School: \_\_\_\_\_ Grade: \_\_\_\_\_  
Parent(s)/Legal Guardian's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_

2. Provide a complete list of sports the student has played, including the appropriate levels of competition (Middle School (6-8), freshman, Junior varsity, and/or varsity):

<u>Grade</u>	<u>School Year</u>	<u>School(s) Attended</u>	<u>Fall</u>	<u>Winter</u>	<u>Spring</u>
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**3. What action are you requesting the DIAA Board to take concerning the waiver request? Please choose one or more of the following options:**

- \_\_\_\_\_ Approve the waiver for the following academic year
- \_\_\_\_\_ Approve the waiver for the following semester or a quarter
- \_\_\_\_\_ Approve the waiver for the following single sport (Identify which sport)
- \_\_\_\_\_ Approve the waiver for the following multiple sports (Identify which sports)
- \_\_\_\_\_ Other (Indicate specifically) \_\_\_\_\_

**4. What regulation are you asking the DIAA Board to waive? Please choose one or more of the following options and identify the specific subsection.**

- \_\_\_\_\_ Regulation 1008 or 1009 Section 2.1 Eligibility, Age
- \_\_\_\_\_ Regulation 1008 or 1009 Section 2.2 Eligibility, Residence
- \_\_\_\_\_ Regulation 1008 or 1009 Section 2.3 Eligibility, Enrollment and Attendance
- \_\_\_\_\_ Regulation 1008 or 1009 section 2.4 Eligibility, Transfers
- \_\_\_\_\_ Regulation 1008 or 1009 Section 2.5 Eligibility, Amateur Status
- \_\_\_\_\_ Regulation 1008 or 1009 Section 2.6 Eligibility, Passing Work
- \_\_\_\_\_ Regulation 1008 or 1009 Section 2.7 Eligibility, Years of Participation
- \_\_\_\_\_ Other (Indicate Specific Section of Regulation 1008, 1009 or an other DIAA Regulation)

**5. What are your reasons for asking the DIAA Board to take the action indicated above? Explain your situation, the reasons for your request and include the following documentation. Use additional pages if necessary.**

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**Required in all cases: Please check or mark N/A**

- 1. Official transcripts from 6<sup>th</sup> grade through to the current school year and also the semester grades which are available up to this point in this school year.
- 2. Attendance Records for the last two years
- 3. Letters or documents with additional information or explanations that support your waiver request.
- 4. A Letter from the School Principal or Headmaster either supporting or not supporting the waiver request.

**Required, only if it is necessary to support your waiver request: Please check or mark N/A**

**6. Please indicate who will be coming to the DIAA Board of Directors meeting for the waiver request hearing as a representative of the school or school district. If no one from the school or school district is coming please indicate that no one will be attending.**

Name \_\_\_\_\_ Title \_\_\_\_\_ will be attending the waiver request hearing from the school and/or school district.

No one will be attending the waiver request hearing from the school or school district.

<b>Date</b>	<b>Principal, Assistant, or Headmaster (Signature)</b>	<b>Principal, Assistant, or Headmaster (Printed Name)</b>
<b>Date</b>	<b>Principal, Assistant, or Headmaster (Signature)</b>	<b>Principal, Assistant, or Headmaster (Printed Name)</b>

**Mail the waiver Request Form and all supporting documentation to:**

**Kevin Charles, Executive Director  
Delaware Interscholastic Athletic Association (DIAA)  
35 Commerce Way, Suite 1  
Dover, DE 19904**

**Call the DIAA Executive Director, Kevin Charles or the DIAA Executive Secretary, Tina Hurley at 302-857-3365 for assistance in completing this form or for information about the supporting documentation that is required.**