

## **Batavia City School District**

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## ATHLETIC PLACEMENT PROCESS

## PARENT/GUARDIAN PERMISSION

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There is a New York State Education Department (NYSED) program that permits physically and emotionally appropriate team that is outside of their grade placement. It is called the Athletic Placement Process (APP).	te students to try out for an athletic
Your child (name): may be eligible to participate in the sport of outside of his or her normal grade level. In order to establish the appropriate eligibility, we must have your permission to	b begin the APP.
This evaluation is a comprehensive evaluation of your child's emotional and physical maturity (including height and we physical fitness, and sport-specific athletic skill in relationship to other student athletes at that level.	ight); as well as athletic abilities,
Physical maturity is determined by the district medical director during a physical exam, using the Tanner Scale. The Tanthe entire body, including the breasts and genitals. The district does/does not accept Tanner ratings from private medical accept a history of menarche for girls in place of a physical examination. Upon passing the medical clearance, the stude and skill assessments. Students must pass all levels in order to meet the requirements of the APP.	providers. The district does/does not
If your child successfully meets the requirements of the APP, he/she will be allowed to try out for competitive high scho grade(s), or compete at the modified level if in grades 9-12. Under normal circumstances, a student is eligible for senior sport for only four consecutive seasons, beginning with the student's entry into the ninth grade. However, by meeting the requirements established by NYSED, your child's eligibility can be extended to permit:  a) participation during five consecutive seasons in the approved sport after entry into the eighth grade; or b) participation during six consecutive seasons in the approved sport after entry into the seventh grade.	r high school athletic competition in a
It is important for you and your child to understand that, once the requirements are met and if he/she is accepted as a me return to a lower-level team (modified) in that sport in that season. Remember, at the higher level of play your child will that is common among older students in a high school environment. Therefore, it is important to take into account your odemands.	be exposed to the social atmosphere
Please feel free to contact me regarding this program or to discuss any aspect of your child's athletic placement. If you a participation in this program, please sign and return the parental permission form to my office.	gree to allow your child's
Sincerely,	
Director of Health, I	PE and Athletics
PARENT/GUARDIAN STATEMENT	
I have read the attached letter and I understand the purpose and eligibility implications of the Athletic Placement Process	s.
My son/daughter (name): has my permission to undergo the on this program. I understand that the determination of physical maturity is a private examination involving inspection of done by a licensed school health professional, and I give my permission for the examination. Upon passing the medical of physical fitness and skill assessments. I understand that passing the evaluation process does not guarantee my child a potential to try out.	clearance, he/she may proceed to the
Parent/Guardian Signature	Date