

METROPOLITAN EAST - ABSENT COMPETITOR FORM

(N.B. This form is to be used for students who are unable to compete at the 2017 Metropolitan East 10 – 19yrs Swimming Trials due to injury, illness or absence at a competition of a higher level).

Student Name: _____ M / F

School: _____

Date of Birth: _____ Age Group: _____

Reason for Application

- (a) Medical (A doctor's certificate noting expected date of return to competition must be attached).
- (b) Absent at a championship of a higher level. (State Level)

Sport	Championship	Details

Only results achieved in 2016/2017 Season will be considered.
Do not list results achieved prior to September 2016.

Event	Age Group	Best 2016/2017 Time	Date of Performance	Venue	Name of Meet
<i>Example 100m</i>	<i>13 years</i>	<i>1.05.07</i>	<i>8.12.16</i>	<i>Chandler Aquatic</i>	<i>South District Carnival</i>

A copy of the results from a sanctioned Swimming Qld event must be attached. It is important to note that submitting a time better than those swum at the Regional Trials does not guarantee selection in the Regional Team.

The absent competitor form must be delivered to the **Convenor** or the **Met East Sports Office** (john.masters@det.qld.gov.au) before the start of competition on **28 February 2017**. If injury or illness occurs on the day and special consideration is required the absent competitor form must be received by the Metropolitan East School Sport Office by 3.00pm on Wednesday 1 March 2017 along with supporting documentation.

Signed - **School Swimming Coordinator / Coach / Sportsmaster.**

Name: (signed) _____ Name: (printed) _____ Date: _____