



OHIO HIGH SCHOOL ATHLETIC ASSOCIATION

Doug Ute, Executive Director

REQUEST FOR ACCOMMODATION – STUDENTS WITH DISABILITIES

It is the policy of the Ohio High School Athletic Association (OHSAA) to support playing rules modifications, where appropriate, to accommodate students with disabilities so that they are able to participate in the interscholastic athletics programs sponsored by the member schools. To that end, the OHSAA shall receive requests for modifications to the interscholastic athletics programs in the sports sponsored by the Association for students with disabilities, including those with hearing, visual and physical disabilities.

The OHSAA commends and supports these students who wish to compete in the sports that are sponsored by the OHSAA, and sincerely desires to work with the member schools to enable students with disabilities to enjoy participation opportunities.

The following procedures have been developed by the OHSAA to examine each individual case to ensure that a request for modification does not give the student with the disability an advantage in the competition or put other competitors at a disadvantage or at risk. The OHSAA must consider the needs of all students involved in the competition.

INSTRUCTIONS: A member school administrator shall contact the OHSAA if a student in need of an accommodation desires to compete in an OHSAA-sponsored sport. Please make your request using the below form as far in advance as possible.

If the OHSAA approves a modification, it is the coach’s responsibility to provide a copy of the OHSAA approval notification to all affected schools competing in the event and to the head contest official. **Only one response letter from the OHSAA is necessary for the modification to be permitted for all interscholastic contests in that sport or event for the current school year.** If the student advances to Regional or State tournament competition, it is the responsibility of the member school to notify the OHSAA.

Please direct your request to the OHSAA sport administrator in charge of the sport in which the student is seeking the modification. See the document “Who to Contact” on the OHSAA web site at www.ohsaa.org for a reference.

1. **Name of Member School:** _____

2. **Address/City/Zip:** _____

3. **Name of Student:** _____

4. **Gender:** _____ **Sport:** _____

5. **Please identify the exact nature of the requested modification in as much detail as possible** *(use additional paper as necessary):*

6. **Has student previously participated in this sport at an OHSAA member school?** YES NO

7. **Would the modification fundamentally alter the nature of the event?** YES NO

Additional Comments (optional): _____

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8. Is the requested modification reasonable under the circumstances? YES NO
Additional Comments (optional): _____

9. Is the requested modification necessary for the student to compete? YES NO
Additional Comments (optional): _____

10. Can the student compete at the same time as the other participants? YES NO
Additional Comments (optional): _____

11. Would the requested modification give the student an advantage over other competitors? YES NO
Additional Comments (optional): _____

12. Would the requested modification cause the other participants to be at a disadvantage or at risk? YES NO
Additional Comments (optional): _____

13. Would the requested modification pose a safety risk to the students and/or any other participants in the event? YES NO
Additional Comments (optional): _____

14. Would additional costs be involved, and if so, how would those costs be met? YES NO
Additional Comments (optional): _____

Administrator Signature: _____ Title: _____

Print Name: _____ Email Address: _____

FOR OHSAA OFFICE USE ONLY | Date of Decision: _____

Approved by Executive Director's Office

Denied by Executive Director's Office

For Sport Season: _____