



**NEW YORK STATE  
SELECTION/CLASSIFICATION PROGRAM  
FOR INTERSCHOOL ATHLETIC PROGRAMS**

**New York State Learning Standards for  
Health, Physical Education, Family and Consumer Sciences**

*"It is not at what age you participate,  
but rather with whom and under what conditions"*

*J. Kenneth Hafner*

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**MARCH 2005**

**The University of the State of New York  
The New York State Education Department  
Office of Elementary, Middle, Secondary  
and Continuing Education  
Albany, New York 12234**



PARENTAL PERMISSION

Dear Parent/Guardian:

There is a New York State program that permits a few qualified students to participate on an athletic team beyond their grade placement. It is called the Selection/Classification Program.

Your child \_\_\_\_\_ (name) may be eligible to participate in \_\_\_\_\_ (sport) above normal grade level. In order to establish the appropriate eligibility, we must have your permission to begin the Selection/Classification screening process. This screening evaluates your child's physiological maturity, athletic performance abilities (physical fitness), and athletic skill in relationship to other student athletes at the specific participation level. The school physician will evaluate your child using the Tanner Scale, to determine his or her physiological maturity.

If your child can successfully meet the requirements of the Selection/Classification Program, he/she will be allowed to participate in an extended athletic career. Under normal circumstances, a student is only eligible for senior high school athletic competition in a sport for four consecutive seasons commencing with the student's entry into the ninth grade. However, by meeting the Selection/Classification requirements established by the New York State Education Department, 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.

**It is important for you and your child to understand that once the requirements are met and he/she is accepted as a member of the team, he/she cannot return to a lower level team (modified) in that sport in that season. Your child will be exposed to the social atmosphere that is inherent to older students and the high school environment.**

Please feel free to contact me regarding this program or to discuss any aspect of your child's athletic placement. If you agree to allow your child's participation in this program, please sign and return the parental permission form to my office.

Sincerely,

*David B. Herman*

Director of Physical Education/Athletics

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PARENT/GUARDIAN STATEMENT

I understand the purpose and eligibility implications of the Selection/Classification Program. My son/daughter \_\_\_\_\_ (name) has my permission to participate in the Selection/Classification Program.

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_







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# SPECIAL CASE

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*If this boy does not qualify for the developmental rating required by using the standards of the maturity scale on the reverse side of this form, but in your opinion he can safely compete with older boys at the level of play indicated below, you as the school physician may give him approval as a SPECIAL CASE.*

STUDENT: \_\_\_\_\_

SPORT: \_\_\_\_\_

### Physician Statement:

I give my permission for this boy to participate on the team for this sport at the level indicated below:

(Check appropriate level)

- Varsity    
  Jr. Varsity    
  Frosh    
  Modified

I realize he did not meet the requirements for this sport using the maturity scale for the Selection/Classification Program, but in my opinion he can safely compete with older boys. I, therefore, give him SPECIAL APPROVAL to play provided he can achieve the required scores on the athletic performance tests and has skills satisfactory to the coach.

NOTE: Before signing, be sure to read the above physician statement carefully.

Signed \_\_\_\_\_

School Physician

Date \_\_\_\_/\_\_\_\_/\_\_\_\_