Age Dispensation Application to Play Down

This form is established in accordance with Clause 4.1(b)(i) of the *National Community Football Policy Handbook* and is to be used by a Club seeking approval from the Controlling Body for a Player to play in a lower Grade for which the Player is no longer age eligible. The Application must be based on one of the grounds specified in Part A. All Parts of this Application form must be completed.

PART A APPLICATION GROUNDS

Player's Actual Grade (e.g. U12)		Grade Seeking Approval For (e.g. U11)	

Select the Ground on which the Application is made and complete the relevant additional information

GROUND 1 - **Disability** as per Disability Discrimination Legislation [See *NOTE 1*]	☐		
Diagnosis of Disability (as per medical certificate)			
GROUND 2 - **Physical Size Considerations - BMI** below 5th percentile for age [See *NOTE 2*]	☐		
Weight (in kg)		Height (in cm)	
BMI		Percentile for Age	
GROUND 3 - **Physical Size Considerations - Height** below 5th percentile for age [See *NOTE 3*]	☐		
Height (in cm)		Percentile for Age	

PART B PLAYER DETAILS

Player First Name		Player Surname	
Player D.O.B.		Player Club	

How many years has the Player played AFL?		Grades Played in Past 3 Seasons	Last season
			2 Seasons Ago
			3 Seasons Ago

Has the Player played any representative football in the past 3 years?	Yes ☐	No ☐
Has the Player been part of a football talent Academy in the past 3 years?	Yes ☐	No ☐
Has the Player finished in the top 5 in a Club or League *Best & Fairest* in the past 3 years?	Yes ☐	No ☐

What other Sports has the Player participated in over the past 3 years and what Grades (if applicable)?	
What year is the Player in at School?	

PART C MEDICAL CERTIFICATE CHECKLIST

A **medical certificate** [see NOTE 4] is attached?		Yes ☐
The medical certificate was completed:	by an appropriately qualified **Medical Specialist** [see NOTE 5]?	Yes ☐
	within **3 months** of submission of the application?	Yes ☐
The medical certificate provides:	a **diagnosis** of the Player's disability or physical size consideration?	Yes ☐
	the **clinical rationale for the dispensation being sought**?	Yes ☐

PART D EVIDENCE REQUIREMENTS

Detail the effects of the ***disability*** or ***physical size considerations*** on the Player's capacity to effectively participate in Australian Football, in particular, against the oldest players in that Grade? [This is to be based on information provided by the Medical Specialist & Parent / Guardian]	
Detail what **reasonable adjustments** have been considered, attempted or undertaken to facilitate the Player remaining in their eligible age group, and any reasons why those adjustments have been unsuccessful or not implemented	
Detail how it is proposed that the grant of age dispensation will support the Player to overcome **any barriers** to their effective participation in Australian Football arising from their ***Disability*** or ***Physical Size Considerations***.	
Detail the availability of **any other assistance** to the Player that will enable them to effectively participate in Australian Football.	
Detail how the participation of the Player in a lower Grade will not adversely impact **the safety and welfare** of the Player and those Players in that lower Grade they will be participating with and against.	
Provide any additional evidence that will assist with assessment of the application. [E.g.: a letter from the player's parents; a NDIS assessment report; a Physiotherapist report.]	

PART E DECLARATION & SIGNATORIES (at least one Parent / Guardian must sign this)

DECLARATION	In signing this Application, each person acknowledges that *the information contained herein is true and accurate to the best of my knowledge*.

Parent / Guardian 1 Name		Signature		Date	
Parent / Guardian 2 Name		Signature		Date	
Club Contact Name		Signature		Date	
Club Contact	Ph		Em		

AGE DISPENSATION APPLICATION NOTES

NOTE 1 **Diagnosis of Disability**	The **diagnosis** of the Player's disability must be supported by a **medical certificate** completed by a **Medical Specialist** with clinical expertise [see NOTE 4 and NOTE 5]. **Disability** means *a disability as defined in the Disability Discrimination Act (1992) (Cth) or in any similar state-based legislation applicable to a particular Controlling Body including those disabilities listed in Appendix 4 of the National Community Football Policy Handbook.* For any **psychosocial disability** (psychiatric disability or mental disorder) a diagnosis must be classified according to the **ICD-11** or **DSM-5-TR**.
NOTE 2 **Physical Size Considerations (BMI)**	An Application under this ground MUST be supported by a ***medical certificate*** [see Note 3] confirming: (i) the Player's ***Body Mass Index ('BMI')*** measurements (height, weight and BMI); and (ii) that the Player's BMI is ***below the 5th percentile*** for the Player's age. The Player's weight and height measurements must be taken within **three months** of the Application. **BMI** = mass (kg) / height^2 (m). **Percentile for age** is determined by reference to a BMI-for-age chart. *The NSW Government Healthy Weight Calculator* is one such tool that may be used to determine this.
NOTE 3 **Physical Size Considerations (Height)**	An Application under this ground MUST be supported by a ***current medical certificate*** [see Note 3] confirming: (i) the player's ***Height*** measurement; and (ii) that this is ***below the 5th percentile*** for the player's age. The Player's height measurement must be taken within **three months** of the Application. **Percentile for age** is determined by reference to a Length-for-age chart. *The Royal Children's Hospital Melbourne Growth Charts* is one such tool that may be used to determine this.
NOTE 4 **Medical Certificate**	An application for dispensation MUST be supported by a ***medical certificate***. The medical certificate must be completed by a **Medical Specialist** [see NOTE 5] ***within 3 months*** prior to the submission of the application. The medical certificate: (i) is to provide a **diagnosis** of the Player's **disability** [see NOTE 1]; (ii) must state the **clinical rationale for the dispensation being sought** and *have regard to all relevant matters pertaining to the Player's disability or physical size considerations*; (iii) must describe how this disability impacts the Player's function and capacity to effectively participate in football in Australian Football; (iv) is to specify the date of the consultation, date of the certificate, the Medical Specialist's name and Medical Specialist's area of specialty. A medical certificate may be in the form of a medical report.
NOTE 5 **Medical Specialist**	A **Medical Specialist** means *a doctor who has completed advanced education and clinical training in a specified area of medicine and includes a Paediatrician, Sports Physician or Controlling Body approved general medical practitioner.* The Medical Specialist must also be *appropriately qualified in an area of practice directly related to the dispensation being sought* (i.e. directly related to the player's disability).