

**Pennsylvania State Athletic Conference
Medical Absence Waiver**

Name: _____

Institution: _____

Sport: _____

Academic Year/Semester in which absence occurred: _____

- 1.) APPROPRIATE MEDICAL DOCUMENTATION MUST BE ATTACHED
- 2.) LETTER OF EXPLANATION SURROUNDING CIRCUMSTANCES MUST BE ATTACHED

NCAA BYLAW 14.4.3.5-(a) Medical Absence

The credit hours required under the satisfactory-progress regulation of 14.4.3.1-(a) and (b) may be prorated at 12 units per term of actual attendance during an academic year in which a student misses a term or is unable to complete a term as a full-time student as a result of an injury or illness. Such an exception may be granted only when circumstances clearly supported by appropriate medical documentation establish that a student-athlete is unable to attend a collegiate institution as a full-time student as a result of an incapacitating physical injury or illness involving the student-athlete or a member of the student-athlete's immediate family. Credits earned by the student during the term to which the waiver applies may not be used in determining progress toward degree.

Signed: _____
(Physician)

Date: _____

Signed: _____
(Director of Athletics)

Date: _____

Signed: _____
(Commissioner)

Date: _____