



*Sodus Central School District*  
*P.O. Box 220*  
*Sodus, New York 14551-0220*  
*www.soduscsl.org*



*"Committed to Excellence and Dedicated to Success"*

**District Office**

(315) 483-4755 - fax

*Nelson Kise*  
*Superintendent*  
(315) 483-5201 - phone

*Heather Vetz, Ed. D.*  
*Assistant Superintendent*  
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*Business Administrator*  
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*Joseph Keeney*  
*Student Services Director*  
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**Jr./Sr High School**

(315) 483-6168 - fax

*Tina Peets*  
*Principal*  
(315) 483-5280 - phone

*Michael Magin*  
*Director of Athletics*  
(315) 483-5216 - phone

Dear Parent/Guardian:

There is a New York State Education Department (NYSED) program that permits physically and emotionally appropriate students to try out for an athletic team that is outside of their grade placement. It is called the Athletic Placement Process (APP).

Your child may be eligible to participate in the sport of \_\_\_\_\_ outside of his normal grade level. In order to establish the appropriate eligibility, we must have your permission to begin the APP.

This evaluation is a comprehensive evaluation of your child's emotional and physical maturity (including height and weight); as well as athletic abilities, physical fitness, and sport-specific athletic skill in relationship to other student athletes at that level.

Physical maturity is determined by the district medical director during a physical exam, using the Tanner Scale. The Tanner Scale requires the inspection of the entire body, including the breasts and genitals. **The district does not accept Tanner ratings from private medical providers until approved by the school medical director. The district does accept a history of menarche for girls in place of a physical examination.** Upon passing the medical clearance, the student may proceed to the physical fitness and skill assessments. Students must pass all levels in order to meet the requirements of the APP.

If your child successfully meets the requirements of the APP, he/she will be allowed to try out for competitive high school athletics during 7th and/or 8th grade(s), or compete at the modified level if in grades 9-12. Under normal circumstances, a student is eligible for senior high school athletic competition in a sport for only four consecutive seasons, beginning with the student's entry into the ninth grade. However, by meeting the Athletic Placement Process requirements established by NYSED, 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 if 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. Remember, at the higher level of play your child will be exposed to the social atmosphere that is common among older students in a high school environment. Therefore, it is important to take into account your child's ability to handle the additional demands.

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,

Michael Magin  
Director of Athletics

*Nurtured by the influence of a diverse community, our district is committed to the success of every student. We will support our students in developing the skills and strategies needed to achieve academic excellence and to become respectful, responsible, kind citizens of a global society. We are dedicated to sustaining an environment that fosters a joy for life and continued learning.*



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**PARENT/GUARDIAN PERMISSION**

I have read the attached letter and I understand the purpose and eligibility implications of the Athletic Placement Process.

My son/daughter (name): \_\_\_\_\_ has my permission to undergo the evaluation process and to participate in this program. I understand that the determination of physical maturity is a private examination involving inspection of breasts and genitals and will be finalized by our school's health professional, and I give my permission for the examination. Upon passing the medical clearance, he/she may proceed to the physical fitness and skill assessments. I understand that passing the evaluation process does not guarantee my child a position on a team, but only permits them to try out.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

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