# Classification Protest Form

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| **Athlete protested:** | | | |
| Surname: |  | First Name(s): |  |
| Gender: | Female □ Male □ | Phone: |  |
| Email: |  | Sport: |  |
| Current sport class: |  | Current sport class status: |  |

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| **Protest launched by:** | | | | | | | |
| Surname | |  | First Name(s): | |  | | |
| Position in the Sport | |  | Signature | |  | | |
| Email: |  | | | Phone:: | | |  |
| Date and time of Protest submission: | |  | | | | | |
| Protest Fee Paid:($50.00): | | yes □ no □ | Date and time: | | |  | |
| Protest Fee Received by: | |  | | | | | |
| Signature: | |  | | | | | |

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| **Reasons for the Protest:** | | | |
| Must include:   * details of the protested decision; * an explanation as to why the protested decision is flawed; * reference to the specific rule/s alleged to have been breached. | | | |
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| **Protest received by:** | | | |
| Surname: |  | First Name/s:: |  |
| Position: |  | | |
| Signature: |  | | |

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| **Protest accepted/ declined:** | |
| Protest accepted □ Protest declined □ | |
| If declined, please specify the reason: |  |
| If accepted, time and location of reassessment: |  |
| Chief Classifier name: |  |
| Signature: |  |

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| **Outcome of the protest:** | | | |
| Sport Class changed □ Sport Class did not change □ | | | |
| Sport Class after Protest: |  | Status after Protest: | R □ C □ |
| Chief Classifier signature: |  | | |

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| **Refund of Protest fee (Applicable only if Sport Class changed following the Protest)** | |
| I hereby confirm that I have received the protest fee on behalf of the payee. | |
| Name: |  |
| Date and time: |  |
| Signature: |  |