# 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: |  |