



Center for Interscholastic Athletics
Southern Westchester BOCES
450 Mamaroneck Avenue
Harrison, NY 10528

Turn-Back Waiver Consideration Form

Definition of a Turn Back:

Any assignment that an official turns back after having accepted the assignment via BOCES system or a game offered to the official based on availability and refuses.

Turnback Waiver Requests will be considered for personal illness, death of immediate family member, or work-related emergency. Medical documentation is required in order to grant a personal illness waiver. All work-related waiver requests will be granted at the discretion of the CIA

Name: _____

Sport: Choose Sport from the Drop Down List

Level: Choose Level From Drop Down

Girls: ☐ **Boys:** ☐

School: Choose School from Drop Down List

Date of Contest: _____

Date of Turn-Back: _____

Reason for Turn-Back:

☐ **Personal Illness** (*medical documentation required*)

☐ **Death of Immediate Family Member**

☐ **Work Related Emergency** *Please Describe:*

Return to the appropriate Sports Desk Assistant:

Jacqueline Hughes
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James Quicci
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