



OFFICIALS' DEVELOPMENT PROGRAM

HARDSHIP RENEWAL PETITION FOR JUDGES, DRIVERS AND SAFETY DIRECTORS

HARDSHIP DEFINITION: An excusable hardship results from an event or condition over which an official has no control. In other words, the event or condition is not self imposed and personal choice has not been exercised. Each request for hardship will be considered on its own merit. Hardships will not be granted for ability, prior qualifications, personality or length of service. Hardships are not renewable. The following are examples and are not all inclusive.

Excusable Conditions: Medical problems (major injury or illness, surgery, pregnancy)
 Military duty
 Temporary job assignments (two months or more, over which you have no control)

Inexcusable Conditions: Non-awareness of renewal requirements
 Personal error in record keeping
 Lack of tournament attendance due to other personal activities
 Absence due to school

INSTRUCTIONS: The deadline for hardship request is May 1st of the following year or 60 days after official notification of downgrade from USA Water Ski, whichever is later. A separate form must be completed for each rating requiring hardship consideration. Upon completion, forward this form, your official notification of shortage from USA Water Ski and any other pertinent documentation to USA Water Ski's Officials Department. USA Water Ski will forward the petition to the appropriate regional committee member who will make a recommendation and forward the petition on to the Committee Chair to ballot the remainder of the committee. USA Water Ski will be notified of the Committee's decision and in turn will notify the petitioner.

Name _____ Membership # _____

Address _____

City _____ State _____ Zip Code _____

Area Code and Phone _____ Email _____

I am hereby filing for hardship renewal consideration for the following:

Rating Type/Level (i.e., Assistant Judge) _____ Events Short: Slalom Tricks Jump

Date Informed of Shortage by USA Water Ski Headquarters _____

Reason for Hardship: Medical Military Job Assignment Other

Copies of Documentation to Confirm Medical/Military Excuse: Yes No

Additional Explanation of Situation (use the back of this form, if necessary) _____

Official's Signature _____ Date _____

Regional Committee Member's Recommendation (use the back of this form, if necessary) _____

Regional Committee Member's Signature _____ Date _____