

Notice regarding Grove City College prospective student-athletes:

Because of NCAA legislation, schools must confirm the sickle cell trait status of incoming student-athletes before participation in intercollegiate athletics in one of the following manners:

- **Documentation:** The student-athlete may provide documented results of a sickle cell solubility test administered before participation.(these results may be obtained as testing ordered by the physician, or these records may be available at the hospital where you were born, or at the office of a long term family doctor).
- **Pending documentation:** A student-athlete who has taken a sickle cell solubility test but whose results are not yet confirmed may participate provided the student-athlete engages in mandatory education, signs a waiver and receives appropriate precautions as set forth by the institution; or
- **Opt-out:** The student-athlete may sign a waiver declining confirmation of sickle cell trait status. Before signing a waiver, the student-athlete shall be provided education regarding the implications of exercising the waiver option. Before athletics participation, a student-athlete who signs a waiver under this provision shall engage in mandatory education regarding sickle cell trait status and receive accommodations as determined by the institution.

PLEASE READ THE ENCLOSED SICKLE CELL TRAIT INFORMATION SHEET PRIOR TO MEETING WITH YOUR PHYSICIAN TO COMPLETE YOUR COLLEGE ENTRANCE PHYSICAL EXAM .

BRING THIS FORM TO YOUR COLLEGE ENTRANCE PHYSICAL EXAM SO THAT YOU CAN INDICATE TO THE PHYSICIAN YOUR CHOICE REGARDING THE SICKLE CELL TRAIT TESTING, AND HAVE THE APPROPRIATE TESTING ORDERED.

____ I have been tested for sickle cell trait and will provide “Certification of Sickle Cell Trait” signed by my physician.

____ I have had the sickle cell trait testing and results are pending. I understand that in order to participate I will undergo education regarding sickle cell trait and sign a waiver, with appropriate precautions taken as determined by Grove city College Athletic Department

____ I decline the confirmation of sickle cell trait status. I have received information about the implications of waiving this testing. I agree to receive and to comply with appropriate accommodations as determined by Grove City College athletic department.

Print Student Athlete- Name

Date

Prospective Varsity Sport: _____

Signature Student- Athlete

Signature of Parent/Guardian if student athlete is under 18