Pennsylvania interscholastic Athletic Association

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WEB SITE www.piaa.org

2015-2016 PIAA DISQUALIFICATION RESPONSE FORM

Name of disqualified coach / contestant: _____
(please circle)

Responding PIAA Member School: _____

Date of Event:_____ Opponent:_____

Level of Competition: Varsity:_____ Jr. Varsity:_____ Jr. High: _____

Action(s) taken by the responding PIAA member school to the player, coach, or team personnel as a result of the disqualification in addition to the one Contest suspension:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

This report has been reviewed and acknowledged by:

Principal_____
Athletic Director_____
Player/Coach _____