

May 20, 2010

Dear Athlete and Parent,

You have expressed an interest in participating in the selective classification process in the Pittsford Central School District. This process determines the student-athlete maturity, physical fitness and athletic skill to participate at an advanced level in the Pittsford Athletic Program.

The following is the step-by-step procedure in the selective classification process.

1. Complete and return the student-athlete profile sheet and the parent permission form to the Athletic Office, 42 W. Jefferson Road, by Friday, June 4th. Selective classification applications **will not** be accepted after this date.
2. Tanner Tests will be given after school on the following dates and locations:
5/28 –CRMS, 2:30 -3:00 pm, BRMS, 3:15 -3:45 pm
6/4 – CRMS, 2:30 -3:00 pm BRMS, 3:15 -3:45 pm
Please contact the Nurse's office with conflicts.
Tanner scores must meet minimum "rating" of each sport requirement.
3. Hand in or mail your **completed** sports candidate questionnaire to the middle school nurse of the school your son/daughter attends (CRMS or BRMS) **between July 16th and July 30th**. No selective classification nurse clearances will be accepted after July 30th date.
4. Student-athlete must pass all required components of the selective classification physical fitness test. The test will be given **Tuesday June 15th with an alternate date of Wednesday August 11th**, at 3:30 p.m. at the Mendon High track and gymnasium. Meet at the track for instructions. Please be on time. (See enclosed description of test)
5. Athletic Director gives final approval for the student-athlete to try out for the advanced level team.

Please feel free to call my office with any questions in regard to the selective classification process.

Sincerely,

Scott M. Barker
Director of Athletics

May 21, 2010

Dear Parent(s):

As part of the Selection/Classification process, your child is required to undergo developmental screening. All students will be required to see the School Physician to determine his/her developmental rating (Tanner score). This is in accordance with the New York State Education Selection/Classification procedures. A physical exam may be required. In males, pubic hair growth will be assessed. In females, breast development may be assessed. **Parents are welcome to accompany their student for this evaluation.** If your child underwent developmental screening previously by the Pittsford School Physician as part of the Selection/Classification process, he/she may not require a repeat exam. Please check with your child's school nurse.

Please note that the "Sport Candidate's Questionnaire" and all required medical forms must be completed and returned to your student's middle school nurse by **July 30th**. Failure to complete and turn in forms may prevent your child from participating in the Selective/Classification process necessary for your child to try out for JV/Varsity sports.

Please contact your child's school nurse if you have questions about the physical aspects of the developmental screening. Please contact the athletic office at 267-1062 if you have any procedural questions regarding the physical fitness screening as part of the Selection/Classification process.

Sincerely,

Dr. Tuite, MD
School Physician
Pittsford Central School District

Scott Barker
Athletic Director
Pittsford Central School District

Permission to Administer Medication in School and During School Sponsored After School and Weekend Activities/Sports

School Year _____
Grade _____
Teacher _____

TO BE COMPLETED BY THE STUDENT'S PHYSICIAN

Student's Name _____ Date of Birth _____

Medication _____ Dose _____ Route _____ Time(s) _____

Purpose _____

Side Effects _____

All medications should be given as close to the prescribed time as possible, however may be given up to one hour before and no later than one hour after the prescribed time. Please advise the school if there is a time-specific concern regarding administration of the medication.

Physician please check if applicable:

- If morning dose is not given at home, nurse may administer **morning dose of** _____ after verbal or written notification from parent.
- Medication **should** be taken on field trips.
- Medication **should** be given during school sponsored after school and/or weekend activities/sports

Physician's Signature _____ **Date** _____

Physician's Name (Please Print) _____ **Phone** _____

I give permission for the above medication to be administered to my child as ordered by my health care provider and for the school nurse to share information with physician regarding this medication.

Parent's Signature _____ **Date** _____

Permission for Students to Carry Medication

A student may self-carry if:

- The student is in grades 6-12. An exception to this rule is when the medication is a metered dose inhaler for asthma, an Epi-Pen, diabetic medication or Lactaid in which case younger students may be permitted to carry and self-administer.
- The medication is **not** a controlled substance.
- An assessment by the school nurse confirms that the student is self-directed to carry and self-administer her/his medication properly.
- Parent assumes responsibility for insuring that his/her child is carrying and taking the medication as ordered.

I give permission for this student to self-carry and self-administer the above medication as I consider her/him responsible. He/She has been instructed in and understands the purpose and appropriate method and frequency of administration of this medication.

Physician's Signature* _____ **Date** _____

I assume responsibility for ensuring that my child is carrying and taking his/her medication as ordered.

Parent's Signature _____ **Date** _____

* A non-parent licensed prescriber is required for all prescription medication

*Pittsford Central School District
Selective Classification Process*

Student-Athlete Profile Sheet

Name: _____

Address: _____

Phone Number: _____

Sport in which you are requesting to complete in: _____

High School: Mendon Sutherland (please circle one)

Middle School Information:

Grade: _____

House Number: _____

Vice Principal: _____

Guidance Counselor: _____

Athletic Information:

Youth or modified coaches who would be able to evaluate your athletic ability:

Name: _____

Phone Number: _____

Name: _____

Phone Number: _____

Name: _____

Phone Number: _____

On the back of this paper, please write a short essay explaining why you should be considered for a JV or Varsity level sport.



PARENTAL PERMISSION

Dear Parent/Guardian:

There is a New York State program that permits a few qualified students to participate on an athletic team beyond their grade placement. It is called the Selection/Classification Program.

Your child _____ (name) may be eligible to participate in _____ (sport) above normal grade level. In order to establish the appropriate eligibility, we must have your permission to begin the Selection/Classification screening process. This screening evaluates your child's physiological maturity, athletic performance abilities (physical fitness), and athletic skill in relationship to other student athletes at the specific participation level. The school physician will evaluate your child using the Tanner Scale, to determine his or her physiological maturity.

If your child can successfully meet the requirements of the Selection/Classification Program, he/she will be allowed to participate in an extended athletic career. Under normal circumstances, a student is only eligible for senior high school athletic competition in a sport for four consecutive seasons commencing with the student's entry into the ninth grade. However, by meeting the Selection/Classification requirements established by the New York State Education Department, your child's eligibility can be extended to permit:

- a) Participation during five consecutive seasons in the approved sport after entry into the eighth grade; or
- b) Participation during six consecutive seasons in the approved sport after entry into the seventh grade.

It is important for you and your child to understand that once the requirements are met and he/she is accepted as a member of the team, he/she cannot return to a lower level team (modified) in that sport in that season. Your child will be exposed to the social atmosphere that is inherent to older students and the high school environment.

Please feel free to contact me regarding this program or to discuss any aspect of your child's athletic placement. If you agree to allow your child's participation in this program, please sign and return the parental permission form to my office.

Sincerely,

Director of Physical Education/Athletics

PARENT/GUARDIAN STATEMENT

I understand the purpose and eligibility implications of the Selection/Classification Program. My son/daughter _____ (name) has my permission to participate in the Selection/Classification Program.

Parent/Guardian signature _____ Date _____

SELECTION/CLASSIFICATION PROGRAM REQUIREMENTS



SPORT		LEVEL	R A T I N G	ATHLETIC PERFORMANCE & DEVELOPMENT STANDARDS					
				GIRLS				AUGUST 1992	
				SHUTTLE RUN	LONG JUMP	FLEXED ARM HANG	STOMACH CURLS	50 - YARD DASH	1.5 - MILE RUN
1/10 SEC	FT - IN"	SECONDS	NUMBER	1/10 SEC	MIN - SEC				
BASKETBALL	VAR	4	10.5	5' 8"	10	46	7.8	15:00	
	JV	3	10.7	5' 6"	8	43	8.0	15:30	
	FROSH	2	11.0	5' 4"	7	40	8.2	15:45	
	MOD	1	11.2	5' 2"	7	38	8.4	16:00	
BOWLING	VAR	2	*	*	Special	*	*	*	
	JV	1	*	*	Tryout	*	*	*	
	FROSH	1	*	*	Procedure	*	*	*	
	MOD	1	*	*	Page 26	*	*	*	
CROSS - COUNTRY	VAR	3	11.0	5' 6"	NOT Required	46	8.0	12:00	
	JV	2	11.2	5' 4"		43	8.2	12:30	
	FROSH	1	11.6	5' 2"		40	8.4	13:00	
	MOD	1	11.8	5' 0"		38	8.5	13:30	
FIELD HOCKEY	VAR	4	10.5	5' 6"	15	46	7.6	15:00	
	JV	3	10.7	5' 4"	13	43	7.8	15:30	
	FROSH	2	11.0	5' 2"	10	40	8.0	15:45	
	MOD	1	11.2	5' 0"	10	38	8.2	16:00	
GOLF	VAR	2	*	*	Special	*	*	*	
	JV	1	*	*	Tryout	*	*	*	
	FROSH	1	*	*	Procedure	*	*	*	
	MOD	1	*	*	Page 26	*	*	*	
GYMNASTICS	VAR	2	11.0	5' 6"	20	46	8.3	NOT Required	
	JV	2	11.2	5' 4"	18	43	8.5		
	FROSH	1	11.6	5' 2"	15	40	8.7		
	MOD	1	11.8	5' 0"	13	38	8.9		
LACROSSE	VAR	4	10.5	5' 6"	15	46	7.6	15:00	
	JV	3	10.7	5' 4"	13	43	7.8	15:30	
	FROSH	2	11.0	5' 2"	10	40	8.0	15:45	
	MOD	1	11.2	5' 0"	10	38	8.2	16:00	
SKIING	VAR	3	11.0	5' 8"	15	44	NOT Required	15:00	
	JV	2	11.2	5' 6"	13	40		15:30	
	FROSH	1	11.6	5' 4"	10	38		15:45	
	MOD	1	11.8	5' 2"	10	36		16:00	
SOCCER	VAR	4	10.5	5' 6"	NOT Required	46	7.6	15:00	
	JV	3	10.7	5' 4"		43	7.8	15:30	
	FROSH	2	11.0	5' 2"		40	8.0	15:45	
	MOD	1	11.2	5' 0"		38	8.2	16:00	

SELECTION/CLASSIFICATION PROGRAM REQUIREMENTS



SPORT		LEVEL		R A T I N G	ATHLETIC PERFORMANCE & DEVELOPMENT STANDARDS							
					GIRLS						AUGUST 1992	
					SHUTTLE RUN	LONG JUMP	FLEXED ARM HANG	STOMACH CURLS	50 - YARD DASH	1.5 - MILE RUN	1/10 SEC	MIN - SEC
SOFTBALL	VAR	4	10.5	5' 4"	15	42	7.6	NOT Required				
	JV	3	10.7	5' 2"	13	40	7.8					
	FROSH	2	11.0	5' 0"	10	38	8.0					
	MOD	1	11.2	4' 10"	10	36	8.2					
SWIMMING	VAR	3	NOT Required	5' 2"	* 15	44	NOT Required	*15:00 +				
	JV	2		5' 1"	13	40		15:30 +				
	FROSH	1		5' 0"	10	38		15:45 +				
	MOD	1		5' 0"	10	36		16:00 +				
* NOT REQUIRED FOR DIVERS - ANY LEVEL												
+ ATHLETES MAY CHOSE EITHER THE 1.5 - MILE RUN OR THE 500 - YARD SWIM (see page 27 for requirements)												
TENNIS	VAR	2	10.7	5' 2"	10	38	8.3	15:00				
	JV	2	10.9	5' 0"	8	36	8.5	15:30				
	FROSH	1	11.2	4' 10"	7	33	8.7	15:45				
	MOD	1	11.4	4' 10"	7	30	8.9	16:00				
TRACK & FIELD	VAR	3	10.7	5' 4"	15	44	7.6	**12:00				
	JV	2	10.9	5' 2"	13	40	7.8	12:30				
	FROSH	1	11.2	5' 0"	10	38	8.0	13:00				
	MOD	1	11.4	5' 0"	10	36	8.2	13:30				

* NOT REQUIRED FOR THROWING EVENTS - ANY LEVEL

** REQUIRED FOR DISTANCE RUNNERS (800 meters or above) ONLY - ANY LEVEL

VOLLEYBALL	VAR	3	10.5	5' 8"	15	46	7.8	15:00
	JV	2	10.7	5' 6"	13	43	8.0	15:30
	FROSH	1	11.0	5' 4"	10	40	8.2	15:45
	MOD	1	11.2	5' 2"	10	38	8.4	16:00



SELECTION/CLASSIFICATION PROGRAM REQUIREMENTS

SPORT	LEVEL	R A T I N G	ATHLETIC PERFORMANCE & DEVELOPMENT STANDARDS					
			BOYS			AUGUST 1992		
			SHUTTLE RUN	LONG JUMP	FLEXED ARM HANG	STOMACH CURLS	50 -YARD DASH	1.5 - MILE RUN
1/10 SEC	FT - IN"	SECONDS	NUMBER	1/10 SEC	MIN - SEC			
BASEBALL	VAR	4	9.5	7' 3"	30	50	6.5	NOT Required
	JV	3	9.7	7' 0"	26	48	6.8	
	FROSH	2	10.0	6' 6"	22	44	7.0	
	MOD	1	10.5	6' 3"	20	42	7.5	
BASKETBALL	VAR	4	9.5	8' 0"	30	50	6.5	11:00
	JV	3	9.7	7' 6"	26	48	6.8	11:30
	FROSH	2	10.0	6' 10"	22	44	7.0	11:50
	MOD	2	10.5	6' 3"	20	42	7.5	12:00
BOWLING	VAR	2			Special Tryout Process Page 26			
	JV	2						
	FROSH	1						
	MOD	1						
CROSS - COUNTRY	VAR	3	10.0	7' 0"	NOT Required	50	6.8	10:15
	JV	2	10.3	6' 6"		48	7.0	10:30
	FROSH	1	10.5	6' 3"		44	7.2	10:50
	MOD	1	10.7	6' 0"		42	7.4	11:00
FOOTBALL	VAR	4	10.0	7' 3"	30	50	6.5	NOT Required
	JV	3	10.3	7' 0"	26	48	6.8	
	FROSH	2	10.5	6' 6"	22	44	7.0	
	MOD-A	2	10.5	6' 3"	20	42	7.5	
	MOD-B	1	10.9	6' 0"	20	40	7.8	
GOLF	VAR	2			Special Tryout Process Page 26			
	JV	2						
	FROSH	1						
	MOD	1						
GYMNASTICS	VAR	3	10.0	7' 0"	35	54	7.3	NOT Required
	JV	2	10.3	6' 6"	30	50	7.5	
	FROSH	1	10.5	6' 3"	26	46	7.8	
	MOD	1	10.7	6' 0"	22	42	8.0	
ICE HOCKEY	VAR	4	10.0	7' 0"	30	50	7.3	11:00
	JV	3	10.3	6' 6"	26	48	7.5	11:30
	FROSH	2	10.5	6' 3"	22	44	7.8	11:50
	MOD	2	10.7	6' 0"	20	42	8.0	12:00

SELECTION/CLASSIFICATION PROGRAM REQUIREMENTS



SPORT		LEVEL	R A T I N G	ATHLETIC PERFORMANCE & DEVELOPMENT STANDARDS					
				BOYS				AUGUST 1992	
				SHUTTLE RUN	LONG JUMP	FLEXED ARM HANG	STOMACH CURLS	50 - YARD DASH	1.5 - MILE RUN
				1/10 SEC	FT - IN"	SECONDS	NUMBER	1/10 SEC	MIN - SEC
VOLLEYBALL	VAR	3		9.8	7' 3"	30	50	7.0	11:45
	JV	2		10.3	7' 0"	26	48	7.3	12:00
	FROSH	1		10.5	6' 6"	22	44	7.5	12:15
	MOD	1		10.6	6' 3"	20	42	7.8	12:30
WRESTLING	VAR	4		9.5	7' 0"	35	54	NOT Required	11:00
	JV	3		9.7	6' 6"	30	48		11:30
	FROSH	2		10.0	6' 3"	26	44		11:45
	MOD	2		10.5	6' 0"	22	42		12:00



ATHLETIC PERFORMANCE TEST
SELECTION/CLASSIFICATION

Components:

1. Lower Limbs
 - a) Agility - SHUTTLE RUN
 - b) Explosive power of muscles – STANDING LONG JUMP
2. Upper Body

Arm and shoulder muscle strength and endurance – FLEXED ARM HANG
3. Abdomen

Abdominal muscle strength and endurance – CURL-UPS (Sit - ups)
4. Speed

Running Speed – 50 - YARD DASH
5. Cardiovascular

Cardiorespiratory system endurance – 1.5 - MILE RUN/WALK

General Rules of Testing

- Component may be retested as many times as desired to achieve the best performance.
- Test components may be administered in any order.
- There is no time frame for testing.



DESCRIPTION OF ATHLETIC PERFORMANCE TEST ITEMS

1. LOWER LIMBS

- a) *Item:* SHUTTLE RUN
- Equipment:* Two blocks of wood, 2" x 2" x 4", a split-second stopwatch
- Description:* Two parallel lines are marked on the floor 30 feet apart. Place blocks of wood behind one of the lines. Athlete starts from behind the other line. On the signal "Ready – Go," the athlete runs to the blocks, picks up one, runs back to the starting line and places it behind the line; then runs back and picks up the second block which and carries it back across the starting line.
- Rules:* Allow two trials with a maximum of five minutes, rest in between. Athlete may not throw the block of wood; it must be placed behind the line.
- Scoring:* Record the fastest of the trials to the nearest tenth of a second.
- b) *Item:* STANDING LONG JUMP
- Equipment:* Mat or floor and tape measure.
- Description:* Athlete stands with feet several inches apart and toes just behind the takeoff line. Swing the arms backward and bending the knees, the jump is accomplished extending the knees and swinging the arms forward.
- Rules:* Allow three trials. Measure from the back edge of the take-off line to the heel or part of the body that touches the floor nearest the take-off line. (Suggestion: Tape the measure to the floor starting at the back of the take-off line and have the athlete jump along the tape so scorer can observe the mark to the nearest inch.
- Scoring:* Record the best of three trials in feet and inches to the nearest inch.

2. UPPER BODY

- Item:* FLEXED ARM HANG
- Equipment:* Horizontal bar approximately 1-1/2" in diameter
- Description:* Adjust bar height so it is approximately equal to the athlete's standing height. Use an overhand grasp (palms away from the face). With two spotters, one in front and one in back, athlete raises body off the floor to a position where the chin is above the bar, the elbows are flexed, and the chest is close to the bar. Hold this position as long as possible.
- Rules:*
- Start watch as soon as athlete has chin above the bar.
 - Stop watch when chin touches the bar, head tilts back to keep chin above the bar, or chin falls below level of the bar.
- Scoring:* Record to the nearest second for the length of time the athlete can hold the start position.

3. **ABDOMEN**



Item: **CURL-UPS (Sit-ups)**

Equipment: Mat and stopwatch

Description: Athlete lies on back with knees bent, feet flat on the floor, heels 12" from the buttocks, and back flat on floor. Arms across the chest, fingers on the opposite shoulder, elbows against chest. For a taller athlete, this distance may be adjusted to accommodate him/her. With someone holding the feet down, the athlete brings upper body forward, curling up (sitting up) to touch elbows to thighs. That is one curl-up. Athlete must return to start position before starting next curl-up. Exercise is repeated for one minute and athlete completes as many curl-ups as possible in the one-minute interval.

Rules: Fingers must remain in contact with shoulders, back should be rounded and head should be forward on the way up. Scapula must touch the floor before starting next curl-up. Hips must remain on the floor.

Scoring: Record one curl-up (sit up) for each completed movement of touching elbows to thighs. No score is given if the fingertips do not maintain contact with shoulders, or if the elbows are extended, or if the hips leave the ground.

4. **SPEED**

Item: **50-YARD DASH**

Equipment: Track or area marked off 50 yards and split - second stopwatch

Description: With arm raised, a starter uses the command "Ready - Go" and accompanies the command with a fast downward sweep of the arm to provide the time with a visual signal to start the watch.

Rules: Time required between the starter's signal and the instant the athlete crosses the finish line.

Scoring: Record in seconds to nearest tenth of a second.

5. **CARDIOVASCULAR**

Item: **1.5-MILE RUN/WALK**

Equipment: Track or area marked off for 1.5 miles and stopwatch

Description: Standing at starting line, athlete begins to run on the signal "Ready - Go" from starter/timer. Starter/timer positions self at the finish line.

Rules: Walking is permitted. However, the object is to cover the distance in the shortest possible time.

Scoring: Record the time in minutes and nearest second.