



APPEALS REQUEST



I wish to protest (check one)

- Conduct
- Rule Violation
- Coach/Team Incident
- National Staff Incident
- Other (specify) _____

I wish to submit the following circumstances for arbitration in accordance with the provisions of the Scholastic Shooting Sports Foundation – Scholastic Action Shooting Program.

Name: _____

Date: _____

Match: _____

Stage: _____

Range Officer: _____

Chief Range Officer: _____

Handbook Rule Violated and How: _____

Accurately describe the circumstances and what happened. Include location, names & phone numbers of any witnesses, and the time of the occurrence.

Name/Team of Person Filing Complaint: _____

Signature of Person Filing Complaint: _____

Contact Info (for person) Filing Complaint (including phone number): _____

Received by: _____

Time: _____

This form and a \$50 check must be sent in to the following address:

SASP National Office – N65W7335 Cleveland Street, Cedarburg, WI 53012-1856 --Attn: Appeals Committee

The \$50 fee will be returned if the ruling is in favor of the appellant. If the ruling is not in favor of the appellant, the filing fee is forfeited.

Appeal Process

1. **Issue in Dispute** - The issue in dispute must involve a violation of a specific SASP rule or policy.
2. **Qualified Appellant** - The injured or aggrieved party MUST be registered with the Scholastic Shooting Sports Foundation and a member of a SASP Team officially recognized by the SSSF. Appeals from anyone other than a SASP registered member WILL NOT be considered.
3. **Head Coach Concurrence** - Appeals filed by an SASP Athlete must have the concurrence of the Athlete's Head Coach. The Head Coach must sign the SASP Appeal Form.
4. **Filing Procedure** – If all efforts at the local level to resolve the issue have failed, the eligible appellant must submit a written appeal on the **SASP APPEAL FORM** (which is available via email from SASP National Administrative Office) within 72 hours of the incident to the State Advisor, State Steering Committee or Director of Development specifying which SASP rule or policy was violated and a statement of facts as to how the rule or policy was violated. The complaint must include the date and specific location of the violation and the names of any witnesses to the violation. In the event no State Advisor or State Steering Committee exists, appeals may be transmitted directly to the Directors of Development. A written hard copy with the date and an original signature must also be submitted and received before any decision is reached or announced.
5. **Filing Fee** - All appeals must include a \$50 filing fee (cashier's check or money order only) that will be held until a decision on the appeal is reached. This fee will be returned if the ruling is in favor of the appellant. If the ruling is not in favor of the appellant, the filing fee is forfeited.
6. **National Program Staff Response to Appellant** - Within thirty (30) days of the receipt of the mailed copy of the appeal, the appellant will receive a written notice of the decision on the appeal. The appellant has the right to appeal the National Program Staff's decision to the SSSF's Board of Trustees. The decision of the Board of Trustees is **FINAL**.

ACTION TAKEN

Arbitration Committee: _____

Minutes of the Committee: _____

The Request Shall Be: Upheld _____

Denied _____

Signatures: _____
