Colorado Academy  
Petition For Upper School Independent Athletic Credit  
2019-2020

The Director of Athletics reviews all applications for independent athletic credit.

Directions:
1. A detailed outline of the outside program is to be submitted to the Director of Athletics.  
(See page 2 - Use an additional sheet of paper if necessary.)
2. The petition must be signed by the outside supervisor, parent, and student.
3. The outside supervisor’s correct name, address, email address, and phone number are required. **The supervisor cannot be the parent of the athlete.**
4. Students must have participated in the activity for a minimum of 3 consecutive years before the request is made.
5. **The activity must include a competitive or public performance piece.**
6. The Director of Athletics, with the counsel of other administrators, reserves the right to weigh the value of the independent sport petition. If, in his opinion, the proposal is not challenging enough or doesn’t present enough rigor, he can reject it.
7. Petitions, indicating which trimesters the students would like to receive credit, must be approved by the Director of Athletics by **August 12 (Fall), November 18 (Winter), March 2 (Spring)** for the appropriate trimester. Late proposals will only be considered under extraordinary circumstances. Petitions are valid for the current year only and must be **re-submitted** for subsequent years.
8. Upper School student-athletes will not receive credit for playing on any outside club team or training in which CA offers the same sport/activity during a concurrent season or for an independent sport during the same trimester the student-athlete is enrolled in an on-campus athletic offering. **In addition, CA does not offer independent athletic credit to a student for a sport or art that CA offers if the student does not participate in the CA offering.**
9. Credit will not be granted for activities or classes that are offered at Colorado Academy. For example, yoga, conditioning, racquetball, rock climbing, and dance will not be given independent athletic credit. The student must spend at least 10 hours per week on the sport/activity. **Six of the ten required hours per week must be taken Monday-Thursday with direct supervision by a sport/activity-specific coach. An activity which demands only weekend hours does not qualify for independent athletic credit.**
10. **Independent credit will only be given up to a maximum of 1 trimester in any one school year.** The point of an independent sports credit is to allow students to pursue a well-developed and focused activity.
11. The independent program must have a supervisor who is willing to coach and oversee the student as well as complete a final trimester grade report that evaluates the growth and development of the athlete in his/her program. **The grade report forms will be sent to the coach at least two weeks prior to the due date. They must be returned by the due date in order for the athlete to receive credit for the independent athletic program. It is the responsibility of the student and supervisor to turn the grade in on time.**
12. Credit is awarded only after receipt of a completed grade report from the outside supervisor.
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Student Name (please print): __________________________________________________________

Name of Sport/Activity: ____________________________________________________________

Trimester for which credit is requested (circle one): 1 2 3

Year (circle one): FR SO JR SR Date Submitting Form ________________________________

Start and end dates of program: ___________________________________________________

Description of proposed program: (attach extra sheet if necessary)

Sponsoring Coach/Supervisor’s Name: ______________________________________________

Email Address: _________________________________________________________________

Phone: __________________ Fax: ________________________________

Student Signature __________________________ Supervisor Signature ___________________

By my signature below, I acknowledge that my child has my support to participate in the Colorado
Academy Independent Athletic Program. I acknowledge that I have read, and agree to abide by, the above
program criteria. I further acknowledge that as part of this program my child will be under the supervision
of an individual selected by me, who is not an employee of Colorado Academy. I accept full responsibility
for the care, supervision and instruction of my child while working with this individual.

Parent Signature __________________________ Date ____________________________

Parent Email: ________________________________

PLEASE NOTE: APPROVAL FOR CREDIT WILL BE MADE ON A CASE-BY-CASE BASIS

CA Action: Approved ________ Denied ________ Date ________  "(Rev. 6/19)