

## APPENDIX A

### REQUEST FOR RE-RATING TO A LOWER LEVEL

Please consider me for re-rating to the next lower level due to long term health issues.

Name: \_\_\_\_\_ Space #: \_\_\_\_\_

Phone #: \_\_\_\_\_

Present Rating: \_\_\_\_\_ Desired Rating: \_\_\_\_\_

Current Level Team Captain: \_\_\_\_\_

Date: \_\_\_\_\_

Player's Signature: \_\_\_\_\_

Captain's Signature: \_\_\_\_\_

Reason for Request: \_\_\_\_\_

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Approval by the Rating Committee: Yes \_\_\_\_\_ No \_\_\_\_\_

Rating Committee Chairperson Signature: \_\_\_\_\_

Note: This form must be submitted to the Rating Committee Chairperson.

## APPENDIX B

### REQUEST FOR AN EXCEPTION TO TENCAP RATING LEVEL

#### At the End of Season

Name: \_\_\_\_\_ Space: \_\_\_\_\_ Phone# \_\_\_\_\_

Current Team Level: \_\_\_\_\_ End of Season Tencap Rating: \_\_\_\_\_

Current Team Level Tencap Range: \_\_\_\_\_ To: \_\_\_\_\_

End of Season Tencap Confidence Level \_\_\_\_\_ %

Player's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Captain's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I am requesting an exception to my Tencap Rating Team Level assignment for next season. I am within one point of the Tencap rating that requires a level change.

Select one of the following:

I am one point below the next level and am requesting a move to the next higher level.

I am one point below my current level and request to stay at my current level.

I am one point into the next level and request to stay at my current level.

Approved by the Rating Committee: Yes \_\_\_\_\_ No \_\_\_\_\_

Rating Committee Chairperson's Signature: \_\_\_\_\_

Note: This form must be submitted to the rating committee chairperson following the end of the season, after the final match results are verified in Tencap.