

## USEF REQUEST FOR PARA EQUESTRIAN CLASSIFICATION

### Who can request USEF Classification?

A National Federation (USEF) can lodge a request for an athlete with impairment to undergo a Classification Evaluation for the purpose of competing in Para Equestrian competition.

## **Eligibility Requirements**

All Athletes with a disability who intend to be classified must produce a Certificate of Diagnosis stating their full medical diagnosis. Each Athlete must have an Eligible Impairment that leads to permanent and verifiable activity limitation which can be measured objectively.

Those Athletes with a minimal impairment must meet the Para-Equestrian **Minimal Impairment Criteria** in order to compete in Para-Equestrian Events. Eligible impairments include:

Hypertonia, ataxia, athetosis; impaired passive range of movement; impaired muscle power; limb deficiency; leg length difference; short stature, vision impairment.

#### **The Classification Process**

All Athletes with impairment who intend to enter Para-Equestrian competitions must proceed through the Classification procedure as below:

Step 1.	Athlete applies through their NF to request a Classification evaluation for PE Competition. The application must include:  • The USEF Classification Request Form  • Completed and signed USEF Consent for Classification  • USEF Certificate of Diagnosis Form and any additional supporting medical documentation
Step 2.	All documentation is forwarded by the USEF to the Chief Classifier to determine if the athlete meets the Eligibility Criteria described above.
Step 3.	<ul> <li>The Classifier will make a decision a, b, or c.</li> <li>a. Request further information through the athlete's NF (USEF) in regards to support the diagnosis and impairment. This request may include additional medical documentation such as reports or copies of medical investigations. USEF will request the additional information from the athlete and forward to the Classifier for a decision (b or c) to be made.</li> <li>b. Approve the request</li> <li>c. Not approve the request</li> </ul>
Step 4.	The Classifier will inform the NF (USEF) of the final decision in writing and if the Request for Classification has not been approved the reason
Step 5.	The Classifier will inform:  The NF (USEF) at which competition the athlete evaluation can occur  The OC for the competition of athletes to be scheduled for classification
Step 6.	Athlete attends competition and undergoes evaluation by a Classifier.
Step 7.	The Athlete's classification is sent to the USEF. Once approved the Athlete's details are added to the USEF Dispensation/Classification Certificate.



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## **Making a USEF Classification Request**

The Classification request must be made by the Athlete's NF (USEF) and include:

- 1. The USEF Classification Request Form, completed legibly and in English;
- 2. USEF Consent for Classification Form
- 3. USEF Certificate of Diagnosis and any additional medical documentation that demonstrates the athlete's impairment. All documentation provided **must be in English**.

The Classification request must be received by the USEF at least <u>6 weeks</u> before the next international competition where the athlete intends to compete.

# **USEF Classification Request Form (to be completed in English)**

	e's Natior	nal Federation (NF)				
Athlete	Details		4			
Last na	me:					
First na	ıme:					
Address	s:					
Town:						
Country	y:			Zip/Post	code	
Date of	Birth:			Gender:		☐ Male ☐ Female
Does th	ne Athlete	have National Classificati	on:	□ No	☐ Yes	
If <b>yes</b>	Date:		Grade:		Grade	Status:
Next sc	heduled (	CPEDI event(s) offeringle to attend, at their over	g athlete evalu	ation for		
Next sc	heduled (	le to attend, at their ov	g athlete evalu	ation for		lassification
Next sc the athl	heduled (lete is ab	le to attend, at their ov	g athlete evalu	ation for	USEF c	lassification
Next sc the athl Compet	heduled (lete is about	e:	g athlete evalu	ation for	USEF c	Click here to enter a
Next sc the athl Compet Location	tition name	e:	g athlete evalu	ation for	Date:	Click here to enter a
Next sc the athle Compet Location Compet	tition name	e:	g athlete evalu	ation for	Date:	Click here to enter a



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#### **NF Verification**

NF contact person submitting the USEF Classification Request Form on behalf of the athlete:

NF:	U.S.A.	Name:	Laureen Johnson
Role:	Director of Para Equest	rian	
E-Mail:	lkjohnson@usef.org		
Signature:			
Date:			

Requests are to be submitted by the Athlete to the USEF at

Laureen K. Johnson Director of Para Equestrian USEF PO Box 83 Gladstone, NJ 07934

Fax: 908-234-9417 <a href="mailto:lkjohnson@usef.org">lkjohnson@usef.org</a>

Before sending this form to the USEF please ensure the following:

- **USEF Classification Request Form completed**
- J USEF Consent for Classification completed and signed (by the athlete) is attached
- USEF Certificate of Diagnosis Form completed and signed (by the athlete and the medical doctor) and any addition supporting medical documentation is attached

#### For USEF use only

Date Classifica	tion Request F	Click here to enter a date.		
Date submitte	d to Classifier(		Click here to enter a date.	
Decision 1:	Choose an item. Dat			Click here to enter a date.
Reason:				
Date NF notified by Classifier:		Click here to enter a date.		

If Decision 1 was to request further information, please complete information below

Date further information and documentation received by USEF:				Click here to enter a date.
Date re-submitted to Classifier(s):				Click here to enter a date.
Decision 2:	Choose an item. Date:			Click here to enter a date.
Reason:				
Date NF notifie	ed by	Click here to enter a date.		

-	USEF REQUEST F	OR PARA EQUESTRIAN CLASSI	FICATIO	ON			
	Classifier(s):						
Ι	If approved:						
	Athlete to be classified at:		Date:	Click here to enter a date.			