

New Jersey State Interscholastic Athletic Association

1161 Route 130 North, P.O. Box 487

Robbinsville, New Jersey 08691

Disqualification Form/Termination of Game

*Please Print or Type
All information must be supplied.*

RE: NJSIAA Rules & Regulations, Rule 2
Specific Sport Regulations, Note 4

Sport: _____ Level: () Frosh Date of Event: _____

() JV

Gender: () Men's () Women's () Varsity Ejection/ Termination:

Ejection: ()

Termination: ()

Home School: _____ Opponent School: _____

Conference: _____

Officials Assigned (please print)

Phone Numbers

_____ Home: _____ Work: _____

_____ Home _____ Work: _____

_____ Home _____ Work: _____

Person Disqualified:

Coach ()

Player ()

Name and (Number, if applicable) _____ / _____

School: _____

Reason for Ejection: Unsportsmanlike flagrant misconduct physical ()

Unsportsmanlike flagrant misconduct verbal ()

Explanation for Ejection:

Explanation for Termination:

Name of Official Who Declared Disqualification/Termination _____

Date Filed: _____

This form must be used for all sports.

Referee/Umpire/Official **must** file this report within **three (3) days** of disqualification/termination to:

1. Offending School Principal(s)
2. Chapter Secretary
3. NJSIAA - P.O. Box 487 Robbinsville, NJ 08691

REMINDER: The school athletic director must be notified by the official in person or by phone no later than noon of the day following the disqualification. Check with your local boards as to who is responsible to contact the Athletic Director.

THIS FORM MAY BE FAXED TO THE NJSIAA @ 609-259-3047
IF FAXED PLEASE DO NOT FOLLOW UP WITH HARD COPY