## 2024-2025 OSSAA WRESTLING WEIGHT MANAGEMENT PROGRAM BODY FAT ANALYSIS APPEAL FORM

To be completed by the coach and parent prior to the Please print	wrestler being retested		
Name of student	Date		
Name of school	Grade		
Gender: Male Female			
Date of original assessment			
Parent of Guardian consent: I hereby give my permiss retested for hydration and body fat analysis. The retest v using the same assessment method or by using the air one of the three approved designated Bod Pod Testing ( will result in a wrestler not being retested.	will be done by either the original assessor displacement plethysmography method at		
Parent or Guardian signature			
Name of Original Assessor			
Assessor's Address			
ity State			
Email address			
Assessor's Phone number	Fax number		
Body weight at original assessment (measured to a tenth	of a pound)pounds		
Method used for the original assessment: Skin calipers _	Bio-Impedance		
All wrestlers will have one opportunity to appeal their body must do so within 14 days of the initial assessment. If a appealed, the wrestler <u>may not</u> wrestle in interscholastii posted on the school's alpha master form. A wrestler will must be made with the assessor who did the initial asses shall be used. A wrestler's body weight cannot be great assessment and if so, the appeal will not be valid and wrestler must also pass a hydration test before being ref wrestler. Option B: An appeal must be made through the to the certified testing center (Oklahoma University Health the Bod Pod air displacement plethysmography method weight cannot be greater or less than 3 pounds of his in not be valid and the original assessment will be used. A before being tested.	a wrestler's body fat test results are being c competition until the appeal results are I have two options. Option A: The appeal ssment and the same assessment method eater or less than 3 pounds of his initial the original assessment will be used. A tested. There will be a fee for retesting a ne original assessor and a wrestler can go n Science Center, Oklahoma City) and use to determine body fat. A wrestler's body nitial assessment and if so, the appeal will		

A wrestler whose body fat is measured at sub-seven percent (males) or sub-twelve percent (females) and wishes to appeal their body fat assessment must meet the following requirement: their body weight at the appeal can be no lower than their original weight at the initial assessment and no greater than three pounds of their original weight at the initial assessment. If so, the appeal will not be valid and the original assessment will be used.

То	be completed	d by the Assess	or – Appeal ass	essment
Hy	dration test:	Pass	Fail	
Bo	dy weight (me	asured to a tenth	of a pound)	pounds
Co	mplete section	ons a or b		
a.	Skin Fold Me		<b>T</b> 10	Test 2 Test 3
	Triceps	Test 1	Test 2	
	Subscapular			
	Abdominal (Male Only)			
	OR			
		ce Assessment		
	Percentage o	f Body Fat		
	Attach printe mode) to this		Tanita Bioelectr	ical Impedance 300WA machine (athletic male
b.	Bod Pod Air Displacement Plethysmography			
	Student's Hei	ight		
	Body Fat Per	centage		
	Attach Bod Pod Body Composition Test results to this form.			
	Students electing to use the Bod Pod for their appeal method must pay the site a fee of \$25.00 at the time of their assessment.			
	Name of technician who administered the Bod Pod Air Displacement assessment:			
				Email address

the Body Composition Test results must be immediately faxed or mailed to the original assessor. Also, a copy of the Body Composition Test results will be given to the athlete.