PENNSYLVANIA STATE ATHLETIC CONFERENCE
CHANGE OF SCHEDULE FORM

Any change in the PSAC mandated schedules shall be coordinated through the conference office and approved by the commissioner/designee.

THIS IS NOT FOR IN-SEASON WEATHER RELATED RESCHEDULING

Procedure:

1. **The coach(es) wanting to change their schedule must sign this form and obtain their athletic director's signature.**
2. **Coach 1 sends this form to opposing Coach 2.**
3. **Coach 2 and their athletic director sign form.**
4. **Coach 2 sends form to conference office by email or fax (570-484-2206).**
5. **Conference office emails approval/denial to both coaches and athletic directors involved.**

Sport (circle one): BASEBALL MEN'S BASKETBALL WOMEN'S BASKETBALL
FIELD HOCKEY FOOTBALL LACROSSE MEN'S SOCCER
WOMEN'S SOCCER SOFTBALL MEN'S TENNIS
WOMEN'S TENNIS VOLLEYBALL

Contest to be changed: _____ at _____

Date originally scheduled: _____ Original time: _____

New Date: _____ New time: _____

Reason for date change – other details: _____

_____

_____

All signatures must be included before a change can be submitted to the PSAC office.

Home Athletic Director	Date	Home Coach	Date
Visiting Athletic Director	Date	Visiting Coach	Date

For PSAC Office Use Only

Approve	Disapprove	Commissioner or Designee	Date