



Rosemont Little League Division Assessment Request Form

Important Notice: This form must be submitted to the Player Agent (player.agent.rll2025@gmail.com) *prior to assessments* on Jan 17th & 18th in order for your player to be considered for assessment in a division other than their default age-based placement. Players will be evaluated by coaches and volunteers during assessments. Scores will be averaged, and the Rosemont Little League Board will make a final decision based on those averages. The Player Agent will notify families of the outcome.

Player Information

- **First Name:** _____
- **Last Name:** _____
- **Date of Birth (MM/DD/YYYY):** _____

Assessment Request

- **Preferred Division to Assess In:** _____
- **Reason for Request:** *(Please provide a brief explanation)*

Parent/Guardian Signature

I understand that submitting this form does not guarantee placement in the requested division. I acknowledge that the decision will be made by the Rosemont Little League Board based on assessment results.

- **Parent/Guardian Name (Printed):** _____
- **Signature:** _____
- **Date Signed:** _____
- **Preferred Contact Information (Phone or Email):**

Please return this completed form to the Player Agent before assessments begin. Thank you for your cooperation and support of Rosemont Little League!

