

Form 2 – To be Completed by the First ADO
(ADO that Collected the Athlete's Whereabouts Filings)

Name of the ADO: _____

Date of receipt of Notice of Athlete's retirement (including a copy of the written retirement notice sent by the Athlete): ____/____/____
DD/ MM/ YYYY

Information Regarding the Athlete:

First Name: _____ Last Name: _____

Date of Birth: ____/____/____
DD/ MM/ YYYY

Sport / Discipline: _____

Name of RTP(s) the Athlete was included in _____

Period of inclusion in the RTP prior to the Athlete's retirement:

____/____/____ to ____/____/____
DD/ MM/ YYYY DD/ MM/ YYYY

Information Regarding the Application:

Was the Request Complete: ☐ Yes ☐ No

Was the Request Properly Substantiated: ☐ Yes ☐ No

Date where the ADO received the Exemption Application: ____/____/____
DD/ MM/ YYYY

Date of the Athlete's inclusion in the RTP after their notice of intent to return to competition:

____/____/____
DD/ MM/ YYYY

First ADO's reasoned opinion on the application. The **Guidelines** published by WADA can offer guidance to the First ADO.

Name and signature of the ADO representative:

Name: _____

Date: ____/____/____ Signature: _____