



# AUSTRALIAN POWERLIFTING LEAGUE THERAPEUTIC USE EXEMPTION APPLICATION FORM

## PLEASE READ CAREFULLY BEFORE COMPLETING

Fill out all sections in **CAPITAL LETTERS** or type.  
Incomplete or unreadable forms may be rejected.

This form is governed solely by the APL Drug Testing Policy & Banned Substance List.

**IMPORTANT:** TUEs will not be granted for any substance or method listed in Sections S0 (Non-Approved Substances), S1 (Anabolic Agents), or S2 (Peptide Hormones, Growth Factors and Related Substances) of the APL Banned Substance List.

## 1. ATHLETE INFORMATION

SURNAME:	
GIVEN NAME:	
GENDER:	
DATE OF BIRTH (DD/ MM/YY):	
MEMBERSHIP ID:	
ADDRESS:	
SUBURB:	
STATE:	
POSTCODE:	
COUNTRY:	
PHONE:	
EMAIL:	

## 2. PREVIOUS APPLICATIONS

Have you previously applied for a TUE under another sporting body (e.g. WADA, ASADA, or an International Federation)

If yes, please attach any current or relevant TUE(s) to this application or please fill out the following information in relation to those applications:

For which substance(s)  
or method(s)

When:

Which organisation:

Decision: Approved or Not Approved

**Note: This information is requested for background only. APL is not bound by decisions of WADA or other Anti-Doping Organisations.**

## 3. (a) IN-ADVANCE APPLICATIONS

Are you applying due to:

Starting a new medication or

A change in your level of competition, meaning that you now require an in advance TUE for a medication you are already using.

## (b) RETROSPECTIVE APPLICATIONS

Is this a retrospective application:

Yes or No

If Yes, on what date was the treatment started:

Reason for retrospective application:

You required emergency or urgent treatment of a medical condition.

There was insufficient time, opportunity or other exceptional circumstances that prevented you from submitting the TUE application, or having it evaluated, before getting tested.

Other exceptional circumstance (Please list below)

Please explain and if necessary, attach further documents:

If the retrospective request is for a substance/method detected as a result of doping control, please state:

Date of sample collection:

Substance(s)/method(s) detected:

**SECTIONS 4 - 6 TO BE TO BE COMPLETED BY THE TREATING PRACTITIONER.**

**PLEASE ATTACH RELEVANT SUPPORTING DOCUMENTATION SUCH AS SPECIALIST REPORTS, PATHOLOGY RESULTS, OR TREATMENT NOTES).**

**4. MEDICAL INFORMATION (please attach relevant medical documentation)**

**PRIMARY DIAGNOSIS**

**Supporting Evidence Attached:**

☐ Specialist letter

☐ Pathology report

☐ Imaging results

☐ Other: \_\_\_\_\_

## 5. MEDICATION DETAILS

	Prohibited Substance(s)/ Method(s) Generic name(s)	Dosage	Route of Administration	Frequency	Duration of Treatment	Date Medication Commenced
1						
2						
3						
4						

## 6. MEDICAL PRACTITIONER'S DECLARATION

I certify that the information provided in Sections 4 and 5 is accurate. I understand that the Australian Powerlifting League (APL) may contact me directly to verify details provided in this application.

NAME:

MEDICAL SPECIALTY:

AHPRA REGISTRATION  
NUMBER:

ADDRESS:

SUBURB:

STATE:

POSTCODE:

PHONE:

EMAIL:

SIGNATURE:

DATE:

## 7. ATHLETE'S DECLARATION

I, \_\_\_\_\_, certify that the information I have provided in this application is accurate and complete.  
I authorise my treating physician(s) to release medical information necessary for the Australian Powerlifting League (APL) to evaluate this Therapeutic Use Exemption (TUE) application.  
I understand and agree that:

- My information will be used only for the purpose of assessing my TUE under the APL Drug Testing Policy & Banned Substance List.
- My information may be reviewed by APL-appointed independent medical experts where required.
- My information will be handled in accordance with the Privacy Act 1988 (Cth) and the APL Privacy Policy.
- My personal information will not be shared with any external organisations without my written consent, except where required by Australian law.

I have read and understood the APL Privacy Policy and accept its terms.

SIGNATURE:

DATE:

If the Athlete is a minor or unable to sign:

SIGNATURE:

DATE:

Please email your completed application and supporting medical information as a PDF document to [hr@aplpowerlifting.com](mailto:hr@aplpowerlifting.com).

Please keep a copy of any documents submitted for your records.

### TUE PRIVACY NOTICE

This Notice explains how the Australian Powerlifting League (APL) will handle your personal information in connection with your Therapeutic Use Exemption (TUE) application.

### TYPES OF PERSONAL INFORMATION

APL may collect and use the following information for your TUE application:

- Information provided on this form (e.g. name, date of birth, contact details, diagnosis, medication, treatment).
- Supporting medical information and records provided by you or your physician(s).
- Assessments and decisions made by APL and its appointed medical experts.

### PURPOSE OF COLLECTION

Your information will only be used to assess your TUE application under the APL Drug Testing Policy & Banned Substance List.

## **WHO CAN ACCESS YOUR INFORMATION**

Your information will only be accessed by:

- Authorised APL staff involved in the TUE process.
- Independent medical experts appointed by APL, if required.

APL will not share your information with any other organisations unless you provide written consent or disclosure is required by Australian law.

## **YOUR RIGHTS**

- You have the right to request a copy of your personal information.
- You may ask for corrections to be made if the information is inaccurate.
- You may withdraw your consent at any time by notifying APL in writing. Please note that if you withdraw consent, APL may not be able to process your TUE application.

## **SAFEGUARDS**

All TUE applications and supporting documents are treated as strictly confidential and will be stored securely in accordance with the Privacy Act 1988 (Cth) and the APL Privacy Policy.

## **CONTACT**

For questions or concerns about how your information is handled, please contact:  
[hr@aplpowerlifting.com](mailto:hr@aplpowerlifting.com)