

Application date Credits applying for

Student name Grade

Physical Education completed: .5 credits 1.0 credits 0 credits

Have you ever been enrolled as a TA? Yes No

Have you ever failed a PE class? Yes No

Have you ever had Late Arrival/Early Dismissal? Yes No

Please check the appropriate box for your waiver request:

<input type="checkbox"/>	Physical Disability - Please attach verification from doctor or health care professional indicating that participation in a physical education class will be detrimental to their health.
<input type="checkbox"/>	Employment* - Please attach verification from employer including dates and times of employment.
<input type="checkbox"/>	Religious Belief - Attach a note from parent/guardian if religion does not allow for participation in physical education.
<input type="checkbox"/>	Directed Athletics* - Participation in a school district extra-curricular athletic program. Students must have at least two (2) full seasons of athletics, finishing in good standing.
<input type="checkbox"/>	Military Science & Tactics
<input type="checkbox"/>	Other Good Cause* - Student must attach a letter to waiver request explaining reason.

*Exclusions for Physical Education Waivers: A student is not eligible for a PE waiver if one or more of the following apply:

*Position as a Teacher's Aide or Office Assistant

*Use of an Open Period (e.g. late arrival or early dismissal)

*Previous failure of a high school physical education class.

Rationale - Meeting a high school graduation requirement has a higher priority over serving as a teacher's aid, office assistant, or use of an open period.

**To be eligible for a waiver request, student must be at least a junior in high school. Waiver requests should be submitted prior to the start of one's senior year.*

I understand that if my waiver is not approved, I will need to make immediate arrangements with my counselor to enroll in a PE class or its approved equivalent.

Student Signature

Parent/Guardian Signature

Committee Approval Only		<input type="checkbox"/> Approved	<input type="checkbox"/> Not approved	Date <input type="text"/>
_____ Administrator Signature		_____ Department Head Signature		
_____ Staff Signature		_____ Counselor Signature		