

## **Request for Exemption from Physical Education Requirement**

Students may request a waiver of up to 1.0 credit of PE 9-12 through a school sponsored sports activity. Each high school athletic season will waive .25 PE 9-12, four seasons will waive 1.0 PE 9-12. Students may also request a waiver of up to 1.0 credit of PE 9-12 for a non-school sponsored sport or activity, medical reasons, or extenuating circumstances. Students may request waiver of .5 Life Fitness for medical reasons only. Medical exemptions must be verified by a physician.

Waiver of PE does not award credit; it waives the subject requirement, but total credit requirements for graduation must still be met.

Student Name	Grad Year	Student #
Request for Waiver of:		
-	y (complete & attach <i>Off-Can</i> equest) om physician)	on on sports participation) Inpus Instruction/Activity PE
Principal Signature  □ <u>Life Fitness</u> .50 credit  Reason for waiver request: Medical (attack)	wh written varification from n	Date (hygician)
Reason for warver request. Wedicar (attac	in written verification from pr	ilysiciaii)
Student Signature:		Date:
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Student Signature:  Parent/Guardian Signature:  Return this completed form to the Counsel  History>Graduation Status to verify tha	ling Office. Students should	Date:check Student Vue>Course
Parent/Guardian Signature:	ling Office. Students should at the waiver has been applied	Date: check Student Vue>Course d to the academic record.
Parent/Guardian Signature:	ling Office. Students should tt the waiver has been applied yed   Not Approv	Date: check Student Vue>Course d to the academic record.

## **High School Sports Activity Verification for PE Waiver Request**

Each season of high school sports activity can waive .25 credit of PE, up to a maximum of 1.0 credits (4 seasons of participation). Complete the following information to verify the number of credits requested on the front side of this form.

1) Sport:	Season:	Year:		
School:	Coach Name:			
2) Sport:	Season:	Year:		
School:	Coach Name:			
3) Sport:	Season:	Year:		
School:	Coach Name:			
4) Sport:	Season:	Year:		
School:	Coach Name:			