

PHYSICIAN REQUEST FOR PHYSICAL EDUCATION MODIFICATION

No student can be exempt from meeting the PE graduation requirement. Students who cannot participate in any physical education shall take PE another semester. GHC offers modified PE for students with temporary disabilities and adaptive PE for students with permanent disabilities.

Student Last Name _____ **Student First Name** _____

DOB _____ **School ID** _____

Type of Injury _____

Mobility Devices:

Please circle the mobility device a student can use Crutches Knee scooter Bike Scooter Other (Specify) _____
How long will the student need to use the mobility device _____

For psychological and physical well-being, we believe that it is best (if possible) for students to participate in some form of physical activity while recovering from an illness or injury. Therefore, for students recovering from an illness or injury, GHC offers Modified Physical Education.

May the student participate in modified PE? Please circle one Yes No

Please circle the activities in which the student MAY participate while enrolled in Modified Physical Education.

Lower Extremity Exercises

Running

Walking

Jumping

Squatting

Stretching

Bending

Weight Lifting

Other (Specify) _____

Upper Extremity Exercises

Overhand Throw

Underhand Throw

Pull Up

Reaching

Stretching

Bending

Weight Lifting

Other (Specify) _____

How long will student need to participate in modified Physical Education _____

If the student cannot participate in modified PE, please indicate length of time the student cannot participate in Physical Education

Physician Signature _____
Date _____

OFFICE STAMP
REQUIRED _____