

Amanda-Clearcreek High School
Intent to Waive – Physical Education Form (2 parts)

Please print the following information and return to the Guidance Office prior to the completion of the athletic, marching band, or cheerleading season.

Name _____ Graduation Year _____

PE Waiver Season Completion: (Circle one) 1 or 2

Activity: _____ Coach/Advisor _____

****It is understood that two successful seasons must be completed to waive the Physical Education graduation requirement and that no credit is earned for the waived activity.**

Student's Signature _____ Date _____

Parent's Signature _____ Date _____

PHYSICAL EDUCATION WAIVER ACTIVITY COMPLETION FORM

INSTRUCTIONS:

Have the coach/advisor/band director sign and date this form at the completion of the season and return the form to the High School Guidance Secretary.

This form is to certify that _____ has completed one season of the following sport/activity and should receive a waiver for 1/2 (one-half) credit of Physical Education, after 2 successful completed seasons of any sport.

(Please indicate the year the sport/event was completed, for ex. 2014 or 2014-15, on the line provided to the left of the sport/event)

- | | | |
|---------------------|---------------------|------------------|
| _____ Baseball | _____ Golf | _____ Tennis |
| _____ Basketball | _____ Marching Band | _____ Track |
| _____ Cheerleading | _____ Soccer | _____ Volleyball |
| _____ Cross Country | _____ Softball | _____ Wrestling |
| _____ Football | _____ Swimming | _____ Other |

 (Coach/Advisor/Band Director Signature)

 Date

Adopted: June 11, 2012
 Revised: November 17, 2014

Amanda-Clearcreek Local School District, Amanda, Ohio

<i>For Office Use Only</i>	
Waiver 1 _____	
Waiver 2 _____	