



Submission Date: _____

ROSEVILLE JOINT UNION HIGH SCHOOL DISTRICT Physical Education Exemption Waiver (Marching Band, Guard, Dance)

Physical Education is a requirement for graduation per the California Education Code 51222 and Roseville Joint Union High School District Board Policy 6142.7. Requests to modify this requirement through the waiver process are evaluated on a case-by-case basis. In addition, a student who qualifies for a physical education exemption will not be awarded 10 credits for the second year of physical education and must still successfully complete 260 credits to graduate.

A physical education exemption may be submitted to waive one year (10 credits) of the graduation requirement of (20 credits of physical education). All freshmen are required to take physical education (PE 9).

IMPORTANT CRITERIA:

- **This exemption is applicable to only the Class of 2028 and beyond.**
- In order to be eligible for this exemption waiver, students must pass PE 9 with a C grade or better and pass five components of the Fitnessgram Test in 9th Grade. A *D* or *F* in PE 9 grade will not qualify for an exemption waiver.
- The approval of this exemption is contingent on enrollment in the course.
- Students must still need to meet ALL credit requirements for graduation.
- Successful passing of the marching band, color guard, or dance class (level 2 and above) must be completed to validate this exemption.
- If a student does not fulfill the course waiver requirements by the end of the junior year, the student will automatically be enrolled in a PE course their senior year.

PERMANENT EXEMPTION

The student is enrolled in Marching Band, Color Guard, or Dance 2 and above: 10 credits taken after 9th grade of marching band/color guard/Dance 2 or above, will waive 1 year (10 credits) of the two-year 20 credit requirement.

The application must be completed for each exemption request. Completed applications shall be turned in to your counselor by May 1st.

Student Signature: _____

Parent/Guardian Signature: _____

Counselor Signature: _____

Principal Review of Exemption Waiver	
Initial:	_____
Date:	_____