

# Murrieta Valley Unified School District



## Physical Education Exemption Agreement

"All high school pupils, except pupils excused or exempted pursuant to Education Code Section 51241, shall be required to attend upon the courses of physical education for a total period of time of not less than 400 minutes each ten school days" (Education Code Section 51222[a]).

**STUDENT NAME:** \_\_\_\_\_

**BIRTH DATE:** \_\_\_\_\_

**HIGH SCHOOL:** \_\_\_\_\_

**GRADE:** \_\_\_\_\_

**The student is requesting a physical education exemption for the following reason/s:**

☐ **Two-Year**

"The governing board of a school district or the office of the county superintendent of schools of a county, with the consent of a pupil, may grant a pupil an exemption from courses in physical education for two years any time during grades ten to twelve, inclusive, if the pupil has met satisfactorily any five of the six standards of the physical performance test administered in grade nine pursuant to Section 60800." (EC Section 51241 [b][1])

☐ **Permanent**

"The governing board of a school district or the office of the county superintendent of a county may grant permanent exemption from courses in physical education if the pupil complies with any one of the following: (1) Is sixteen years of age or older and has been enrolled in the 10th grade for one academic year or longer. (2) Is enrolled as a postgraduate pupil. (3) Is enrolled in a juvenile home, ranch, camp, or forestry camp school where pupils are scheduled for recreation and exercise pursuant to the requirements of Section 4346 of Title 15 of the California Code of Regulations." (EC Section 51241 [c][1][2][3])

**Student explanation for exemption request:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

_____	_____	_____
<b>Student Name</b>	<b>Student Signature</b>	<b>Date</b>

_____	_____	_____
<b>Parent/Guardian Name</b>	<b>Parent/Guardian Signature</b>	<b>Date</b>

*Student meets qualifications for exemption. Additional evidence of qualification is attached.*

_____	_____	_____
<b>Counselor Name</b>	<b>Counselor Signature</b>	<b>Date</b>

☐ **Approved**

☐ **Denied**

**Reason for Action:** \_\_\_\_\_

**Effective Date:** \_\_\_\_\_

\_\_\_\_\_  
**Principal/Assistant Principal Name**

\_\_\_\_\_  
**Principal/Assistant Principal Signature**

\_\_\_\_\_  
**Date**