



Application date		Am	nount of cr	edit applying for			
Student name					Grad year		
Meeting a high school graduation requirement has a higher priority over serving as a teacher's aid, office assistant, or use of an open period. To be eligible for a waiver request, student must be at least a junior in high school. Waiver requests should be submitted prior to the start of one's senior year. I understand that if my waiver is not approved, I will need to make immediate arrangements with my counselor to enroll in a PE class or its approved equivalent. *Exclusions for Physical Education Waivers: A student is not eligible for a PE waiver if one or more of the following apply:							
*Position as a Teacher's Aide or Office Assistant *Use of an Open Period (e.g. late arrival or early dismissal) *Previous failure of a high school physical education class.							
Physical Educati	on completed: 🔲 .5 cre	dits 🗌 1.0	credits	0 credits			
Have you ever b	een enrolled as a TA?	☐ Yes	☐ No				
Have you ever fa	iled a PE class?	Yes	☐ No				
Have you ever ha	ad Late Arrival/Early Dismis	sal? 🗌 Yes	☐ No				
Please check the appropriate box for your waiver request:							
Physical Disability - Please attach verification from doctor or health care professional indicating that participation in a physical education class will be detrimental to their health.							
☐ Employment*- Please attach verification from employer including dates and times of employment.							
Religious Belief - Attach a note from parent/guardian if religion does not allow for participation in physical education.							
Directed Athletics* - Participation in a school district extra-curricular athletic program. Students must have at least two (2) full seasons of athletics, finishing in good standing.							
Military Science & Tactics							
Other Good Cause*- Student must attach a letter to waiver request explaining reason.							
Student Signature			ī	Parent/Guardian S	ignature		
Committee Appro	val Only						
Administrator Sig	gnature		Арр	roved for	credits	☐ Not a	pproved
Counselor Signat	ure		Ву		Date		
Department Hea	d Signature			Request	completed/w	raiver applied	