

Physical Education Waiver Application

Must be completed by the end of junior year

Name of Student _____

Print Last

First

Middle

Student Number _____ Grade _____

I have completed two seasons of:

Season 1: Sport or qualified activity _____

Season participated _____ Year _____

Season 2: Sport or qualified activity _____

Season participated _____ Year _____

Return this form to the guidance office when complete.

Students who choose the physical education waiver fulfill the graduation requirement however no credit is granted. Students must still fulfill the 21 credits for graduation.

Qualifying sports or activities: District sponsored sport, Cheerleading, Marching Band, JROTC, Winter Guard, Dance Team, Winter Drum Line.

For office use:

Physical Education Waiver granted Yes No.

Athletic Director _____

Counselor _____

Entered in DASL _____