## MIDDLE SCHOOL PHYSICAL EDUCATION WAIVER INFORMATION AND CONTRACT

## To make it possible for students to take an additional elective, we offer a physical education waiver to accommodate those who meet the following criteria:

- All requests for a waiver must be approved through the Principal.
- Students must enroll in two year-long electives to qualify for a waiver.
- Parents must request the waiver and include a detailed written justification.

## **Sports Participation:**

- Student participation in OUT-OF-DISTRICT sport(s) must be validated by a coach including the substantial time commitment (or)
- Student participation in AFTERSCHOOL sports must occur in two different seasons.

## PLEASE COMPLETE ALL INFORMATION FOR CONSIDERATION

Student Name		Grade	I.D. #
OPTION #1 – The following i	nformation is required for	OUT-OF-DISTRICT SPORTS	
Sports Organization		Sport	hours Time Commitment per week
Printed Name of Coach	Sign	ature	Phone #
Sports Organization		Sport	hours Time Commitment per week
Printed Name of Coach	lame of Coach Signature		Phone #
OPTION #2 – The following i	nformation is required for	AFTERSCHOOL SPORTS. These	e must occur in different seasons.
Sport #1	Season	Sport #2	Season

REASON FOR WAIVER REQUEST - PARENT TO COMPLETE THIS SECTION (Additional Space on Reverse Side)

I understand the conditions of the physical education waiver and I will be responsible for providing documentation of physical activity per the criteria listed above. (Attach any supporting document) I will also provide transportation for the activities selected. I understand scheduling conflicts may prevent scheduling of additional electives.

Parent/Guardian Name (Printed)

Parent/Guardian Signature

Principal Signature

Counselor Signature

**NOT APPROVED** 

Date