Board File: IKFC-E

PHYSICAL EDUCATION WAIVER APPLICATION FORM

Student Name: _____ Current Grade Level:_____

Check the activity below that you successfully completed in order to waive your P.E. requirement:

o Marching Band (.5 waiver per marching season)

- o CHSAA sponsored sport (.5 waivers per sport season) Sport(s)_____
- o Spirit Squad (Cheerleading/Poms)

Semester(s) and dates of participation:

Amount of credit requested to be waived: ____.5 ____1.0

Student explanation of rationale for requesting waiver (including a plan for fulfilling all graduation credit requirements):

Parent Signature:	Date:
Coach/Sponsor Signature (first season):	Date:
Coach/Sponsor Signature (second season):	Date:
Counselor Signature:	Date:

For Administrator Use ONLY:

_____ This request to waive P.E. credit is accepted.

_____ This request to waive P.E. credit is denied. It does not meet the criteria for a P.E. waiver for the following reasons:

Administrator	Signature:
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Date:

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