

## SEATTLE PUBLIC SCHOOL HIGH SCHOOL PHYSICAL EDUCATION (PE) WAIVER REQUEST FORM

PE Waivers will be granted for only ONE Semester at a time. A waiver will only be approved if the student has proven they have met the PE competency. A student can only be waived from the credits for physical education. A student must take other classes to make up for the missing credits to meet minimum high school graduation requirements. Students who are a Teacher/Office Assistant or has a hole in their schedule may not receive a waiver for the term.

The following categories qualify as allowable reasons for the administrator/designee to consider waiving PE. Attach a copy of your High School Transcript or Academic History and your 4-year course plan.

	ion completed. $\Box$ 1 semester $\Box$ 2 semesters		
	ved a waiver in physical education?		
$\square$ Yes,	semester waived (e.g., Second semester, So	phomore Year)	
$\square$ No			
3) Check all that a			
	Teacher's Aide (TA) or Office Assistant (O.	A)	
☐ Enrolled in st	<u> </u>		
☐ Have you had	l any open periods e.g., late arrival, early dis	nissal?	
1. Physical Disability		EP, doctor or health care professional indicating that	
	participation in a PE class will be detrimed		
2. Religious Belief		es against participation in physical education.	
	Verification from student's religious leade	*	
3. Directed Athletics		District extra-curricular athletic programs	
	weekly log documenting a minimum of 80 waiver- summers do not count) of regular	on in community-based organized athletics requires a hours (during the semester that the student requests the workouts, practices, and competitions. Parent/Guardian The transcript must show 5 semesters of coursework.	
4. Military Science	<b>HPE8206</b> - Attach proof of enrollment in	-	
5. Employment	HPE8207 - Student must work to assist family or student is currently self-supporting. Attach		
1 7	verification from employer.	, , , , , ,	
6. Other Good Cause	<u>HPE8208</u> – (for Juniors/Seniors only) <b>Th</b> Please explain:	e transcript must show 5 semesters of coursework.	
Name:	Student ID #:	Class of:	
PE Competency Test Sco	ore: (meeting standard = 3 or highe	r) Waiver Category #:	
Athletic Program Participated in:		Semester ending:	
(Teacher/Coach Signatur	re)	(Parent/Guardian Signature)	
Office Use Only App	proved Denied (provide student dire	ection to register for PE)	
Administrator/Designe	e Signature Date	Date	
Entered by Data Regist	tration Specialist Date		

## Log for Documenting PE Waiver Request Physical Activity (Minimum 80 hours in one Semester)

Activity	Date	Number of Hours	Supervised by
	Total	*	
	Hours		