

## SEATTLE PUBLIC SCHOOL PHYSICAL EDUCATION WAIVER REQUEST FORM

PE Waivers will be g returned to the school	ranted for only ONE Semester  I. Waivers received after the d	at a time. Request forms should eadline for the applicable semes	d be completed and ster will be denied.
First Semester Deadl	ineMarch 1"	Second Semester Deadline	October 1 <sup>st</sup>
Waiver requests mus	t be directly related to the crite	rion listed below:	
I. Physica	al Disability (HPE8203) - Atta	easons for the principal to consi ch verification from doctor or h ass will be detrimental to studer	ealth care professional
2. <u>Religio</u>	us Belief (HPE8204) - The stu Il education. Verification from	dent's religion stipulates agains student's religious leader is req	t participation in uired.
3. <u>Directe</u> athletic athletic the students	ed Athletics (HPE8205) - Parti programs requires a coach's v is requires a weekly log docum fent requests the waiver- summ	cipation in Seattle School Distri erification. Participation in con enting a minimum of 80 hours ( iers do not count) of regular wo e coach's verification are requir	ict extra-curricular nmunity-based organized during the semester that rkouts, practices, and
4. <u>Militar</u> militar	ry <u>Science (</u> HPE8206) - Attach v science class	proof of enrollment is a Seattle	: Public Schools*
SUDDOE	ting. Attach verification from	oust work to assist family or stude comployer.	
teacher schedu	or office assistant) may qualifule and transcript. *The transcript	aking a full academic course losty for a waiver. Include a copy of the must show five semesters of ginning the second semester of	of the current class coursework. Students
7. Other or com	Good Cause (HPE8208) - Read munity activity that has a phys	isons include: student is participated educational component; the uirements at no fault of the students	e student was not able to
Name:	·	Date:	
Student ID#:	•	Class of:	
.Waiver Cate		for Semester ending	
Note of expl			
<del></del>			
·	<u> </u>		
•	·	. •	
. (Teache	r/Coach Signature)	(Parent/Guz	ardian Signature)
3			·
	Office	: Use Only .	
Approved OR Deni	ed by:		
Ratered by:		Course # Terr	n;

## Log for documenting PE Waiver Request physical activity (Minimum 80 hours)

Activity	Date	# Hours	Supervised by
<u> </u>		·	
,			
		-	
			•
		,	
•			
	<del>-  </del>	<del> </del>	
· :			
	·		
	Total bea		ان دو ان <u>مستورد از مورد دو در در برو</u> د که ۱ در بازوری <u>براین از نینه ای برون او در مستوره مستورد می</u> دادیوایی
	Total hrs	*	