

PHYSICAL EDUCATION WAIVER PRE-APPROVAL APPLICATION

Date of Application _____

Student Name _____

Student Address _____

Student Phone _____ Current grade in school _____

Waiver Activity

Name or title of activity _____

Sponsoring organization _____

Coach or Instructor _____ Phone # _____

Duration of Activity from _____ to _____

Total hours of activity _____

Parent/Student Responsibilities

1. Complete a daily log sheet using the following headings:
DATE • HOURS OF ACTIVITIES • COACH/INSTRUCTOR SIGNATURE
2. Upon completion of the activity, turn in daily log sheet(s) with the hours totaled and your PHYSICAL EDUCATION WAIVER form to your counselor.

Student Signature

Parent Signature

Status

Approved _____

Counselor _____ Date _____

Denied _____

Counselor _____ Date (Attach reason) _____