Physical Education Waiver

Student Name (please print) ______________________________________________________________

Date _____________________ Current Grade __________  Graduation Year ______________________

Sport/Activity ____________________________ Season School Year(s)  _________________________

A separate form for each season must be completed.

Note: Using a waiver for the physical education requirement will excuse the student from PE classes, but the total number of credits for graduation will not change, therefore the student would have to replace the required .50 credit for physical education with another academic elective. No credit is awarded for the PE Waiver. The waiver will be noted on the student’s official transcript. In order to receive the waiver, the student is required to complete two full seasons in good standing in one or in any combination of the following activities: John F. Kennedy Catholic High School Interscholastic Sport or John F. Kennedy Catholic High School Cheerleading. A complete season is defined as a season where the student remained on the roster for the complete season and was not removed or left the team or activity for any reason.

This form must be filled out at the completion of each season and the necessary signatures must be obtained by the student. Forms will not be accepted from previous school years. It is the student’s responsibility to turn the completed form with signatures into the Guidance Office by the day before Christmas break for Fall Sports and the last day of school for Winter/Spring sports.

School Staff: By signing below, you certify that the student has completed the season in good standing with the above-mentioned program.

Head Coach/Advisor Signature __________________________________________________________

Athletic Director ______________________________________________________________________

By signing this form, I understand that two full seasons must be completed to waive the physical education graduation requirement and that no credit is earned for the waived activity. I understand that if I am cut from the team, quit the team, are ineligible during the season, or have a violation of our athletic code during the season, the waiver will no longer be valid.

Student Signature ______________________________________________________________________

Parent Signature ______________________________________________________________________