



FHSD PHYSICAL EDUCATION WAIVER

Student Name _____ Grade _____ Student ID _____

I have successfully completed a season of the following qualifying sports/activities:

Sport/Activity 1 _____

Year _____ (i.e. 2020-21) Grade _____

Sport/Activity 2 _____

Year _____ (i.e. 2021-22) Grade _____

Students who successfully complete the PE waiver fulfill the PE graduation requirement only, no credit is awarded for the PE Waiver.

Qualifying district sponsored/approved sport/activity:

- | | | | |
|---------------|------------|----------|---------------|
| Baseball | Dance | Lacrosse | Track |
| Basketball | Diving | Soccer | Volleyball |
| Bowling | Football | Softball | Wrestling |
| Cheerleading | Golf | Swimming | |
| Cross Country | Gymnastics | Tennis | Marching Band |

Return this form to the Counseling Office when complete

For office use below

Season 1 Verified: _____ Season 2 Verified: _____

Entered in DASL: _____ Date _____