

Liberty Christian School

Request for Waiver of Physical Education Requirement

It is the intent of Liberty Christian School to allow for PE waivers for students who participate in a school directed or HS sport as required by Washington State law. Liberty Christian School expects to provide this waiver with a high standard for what constitutes equivalent athletic activity. Our PE classes provide rigorous activity and fitness knowledge. The criterion defined below for a waiver based on school directed or high school sport participation is meant to define that high standard.

A student will be allowed to waive up to one full credit (2 semesters) of physical education for school directed or high school athletics. In order to waive a semester of physical education for school directed or high school athletics, high school student athletes must meet all of the following minimum criteria:

1. Apply for the waiver utilizing this form
2. Complete a minimum of 75 hours of participation in school directed or high school athletics (counting only one and a half hours of participation per practice and no more than two practices per day).
3. Complete a full season or one semester of school directed or high school athletics prior to requesting the waiver.

This form **MUST** be completed for **EACH** semester waived, **with a maximum of 2 semesters available for waiver**.

Please read this form carefully, complete, and return to the counselor's office.

Student Name: _____ Date: _____

Parent's Name: _____

Anticipated Year of Graduation: _____ Current Grade in School: _____

School Directed or High School Sport Completed: _____

Date/Season Completed: _____

Coach/Athletic Director Signature of Approval: _____

I understand that this process will waive a graduation requirement BUT WILL NOT RESULT IN CREDIT. My student MUST still earn the necessary total credits to graduate for the state of Washington and Liberty Christian School.

Requested by:

Student Signature	Parent Signature
Date	Date

___ Approved ___ Denied Date placed in student file: _____

Approved by:

Counselor or Authorized LCS Administrator	Date

Principal Signature	Date