

## EXHIBIT

## HIGH SCHOOL GRADUATION REQUIREMENTS

**SRCS PHYSICAL EDUCATION EXEMPTION  
REQUEST FORM****Student Name:** \_\_\_\_\_**Expected Year of Graduation:** \_\_\_\_\_

I have participated in the following regular school-sponsored interscholastic athletic program (Education Code 51242) and would like to be exempted from the second physical education requirement. (Note: a separate form must be completed for each season of sport played).

Sport: \_\_\_\_\_ Year of Participation: \_\_\_\_\_

**I approve of my child's request for a physical education exemption.**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Coach/Athletic Director Verification: The above mentioned student attended practice, participated in training exercises as required, and completed the entire season of the sport listed above.**

Coach Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Athletic Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Note: In the event the Coach is not available to sign above, the Athletic Director may sign for the Coach)

**The Physical Education Exemption Request Form MUST be completed no later than December 1st for Fall Sports, March 1st for Winter Sports and June 1st for Spring Sports. Forms turned in after the deadline will not be considered.**

**High School Registrar:**

Verification of 9th Grade Physical Fitness Exam: \_\_\_\_\_ Passed \_\_\_\_\_ Failed \_\_\_\_\_

Initials \_\_\_\_\_ Date \_\_\_\_\_

EXHIBIT

HIGH SCHOOL GRADUATION REQUIREMENTS (continued)

**Principal approval of Physical Education Exemption: I recommend that the above named student be granted a physical education exemption for participation in the above sport.**

Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved ☐ Denied ☐

*Records of exemptions will be included in the individual student's cumulative student record file.*