

2020-2021

Middle School Physical Education Waiver

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Florida law requires each school district to develop a physical education program that stresses physical fitness and encourages healthful, active lifestyles and to encourage all students in prekindergarten through grade 12 to participate in physical education. The law further requires a minimum of one semester of physical education annually for students in grades 6 through 8, [F.S.1003.455](http://www.leg.state.fl.us/statutes/index.cfm?mode=View%20Statutes&SubMenu=1&App_mode=Display_Statute&Search_String=F.S.+1003.455&URL=1000-1099/1003/Sections/1003.455.html).

Middle school students in Hillsborough County Public Schools are scheduled for a full-year physical education course annually, except when a semester of physical education is paired with a semester of intensive math. All students are encouraged to take advantage of this opportunity within their school day to experience movement and build upon knowledge, skills, and values that support a healthy and active lifestyle.

However, the law allows for a waiver when a student is enrolled in a remedial, intensive course or when a parent makes a written request for one of the following reasons.

1. The student participates in physical activities outside the school day that are equal to, or in excess of, the physical education requirement.
2. The parent requests that the student enroll in another available course.

Students who waive physical education must enroll in another available on-site or virtual course. A minimum of seven courses is required for middle school students.

To request a waiver for the physical education requirement, please complete the following information and return this form to your child’s school counselor or assistant principal.

Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check the primary reason for waiver request.

\_\_\_ Enrollment in a remedial course

\_\_\_ Participation in physical activities outside the school day that are equal to,   
or in excess of, the physical education requirement

\_\_\_ Preference for an alternate course

List three alternate courses, in order of preference, to be scheduled in place of physical education.

1st Preference \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2nd Preference \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3rd Preference \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_