PINELLAS COUNTY SCHOOLS PHYSICAL EDUCATION THROUGH SPORTS REQUEST FORM

(Read further instructions on the reverse side and complete this form only after the **two** sport seasons have been successfully completed.)

	Name:	Student Number:				
	School:	Date:				
	Sport Completed:	Date Season 1 Completed:				
	Sport Completed:					
l I						
II.	Student Statement of Understanding: I understand that because I have participated for two full seasons in a district-sponsored high school sport as a competing athlete, I will not be required to take the state required 1 credit of Physical Education, Health Opportunities through Physical Education (HOPE), which would otherwise be necessary for graduation (This applies to junior varsity and varsity sports, grades 9-12). I understand that sports participation does not prevent me from taking physical education, and that I may elect to take any physi-					
	cal education course, as a credit course.					
	I understand that I will not receive a grade or course credit for the sport(s) in which I participated. I will simply be granted an exemption from taking HOPE. I have also read and understand all related items on the reverse side of this form.					
	(Student Signature)	(Date)				
III.	Parent Permission:					
	As parent/guardian, I understand that the above named studer Education provides students with the knowledge and skills they comprehensive health education program is to motivate studer avoid or reduce health related risk behaviors. I understand that instruction in the following: • Community health • Consumer health	y need to be healthy throughout their lifetime. The intent of a nts to maintain and improve their health, prevent disease, and				
	· J	Prevention and control of disease				
	,, p	Substance use and abuse Teen dating violence				
	I understand and allow the student to substitute his/her participation in high school sport(s) in lieu of the normally required credit in Physical Education (HOPE). I have also read and understand all related items on the reverse side of this form and am aware that no grade or course credit will be awarded for this substitute.					
	(Parent/Guardian Name - Please Print)	(Date)				
	(Parent/Guardian Signature)					
IV. APA / Assistant Principal for Athletics Verification of Participation: The above named student completed a full season in:						
	Sport School year of	APA Signature				
	Sport School year of					
Denied Reason:						
	(APA Signature)	(Date)				

Beginning with the 2017-2018 school year. Before filling out this request, please read the following for additional information to determine whether you qualify for this request.

Interscholastic Extracurricular Sports: This form can only be used by performing student athletes who have participated in two (2) full seasons of junior varsity or varsity level sports. Interscholastic extracurricular sports are interpreted as those adopted by the School Board of Pinellas County and approved by the Florida High School Activities Association. No other sport, intramural, intermurals, or extracurricular activities can be used in this request. The approved qualifying activities are as follows: Two full seasons in one sport or one full season in two different sports will satisfy this requirement.

Baseball	Cross Country	Football	Soccer	Swimming/Diving
Basketball	Tennis	Golf	Softball	Girls Flag Football
Volleyball	Track	Wrestling	Lacrosse	

Full Season: A full season (in the sport) is defined as attendance and participation in both the practices and competitive events from the allowable first day of practice to the elimination of a team from FHSAA tournament competition. Ninety-five percent attendance at both practices and events will be required to meet this requirement. The high school coaches must verify that the student has met these guidelines. There will be <u>no exceptions</u> to these guidelines, as this is a substitute for state required courses for graduation. Non-participation or non-attendance, <u>for any reason</u> (vacations, injuries, illness, etc.) will be calculated in meeting the requirements, as set above.

Graduation Requirements: The granting of this request does not affect the number of credits required for graduation. The student must replace these courses with electives to meet the 24 credits required for high school graduation. If approved, the student will have an entry on their record showing: (Season 1 waiver #1500410, Season 2 wavier #1500420). This entry will indicate that no course credit has been earned for this participation. Consequently, no grade or credit affecting grade point average will be given for this participation.

STUDENT RESPONSIBILITIES FOR COMPLETING THE REQUEST PROCESS:

- 1. Secure forms from the Assistant Principal for Athletics (APA).
- 2. Read instructions and guidelines carefully to determine whether you qualify.
- 3. Complete sections I and II.
- 3. Have parent/guardian complete and sign Section III.
- 4. Have Assistant Principal for Athletics complete Section IV.
- 5. Request is granted OR request is denied and returned to student with an explanation.
- 6. Appeal If the request is denied you may appeal as per the Student Code of Conduct.