



# Jarrell Independent School District

## Physical Education Substitution - Parent Form

*This application must be completed by the parent/guardian on a yearly basis.*

### Personal Information:

Waiver Request School Year:		Campus:	Middle School High School
Semester:	Fall Spring Both	Grade Level:	7th Grade 8th Grade 9th Grade 10th Grade 11th Grade 12th Grade
Student Name:			
Parent / Guardian Name:			
Home Address:			
Parent Email:			

### Type of Waiver Request:

Category 1 - Olympic-level participation and/or competition <ul style="list-style-type: none"> <li>• Attach documentation of Olympic standing or national athletic status or rank.</li> </ul>
Category 2 - Private or commercially-sponsored physical activities that are not Olympic level <ul style="list-style-type: none"> <li>• Agency Providing Activity: _____</li> <li>• Activity Hours per Week: _____</li> <li>• Description of Activity: _____</li> </ul>

### Agreement Statements:

Please read each statement, print and sign the application, attach the required documents, and submit the completed packet at the Administration Building (108 E. Ave. F, Jarrell, TX 76537)

I understand that my student will not earn credit and might lose the opportunity to participate in the program if a log of hours, signed by the trainer/coach, is not submitted to the counselor before the end of each semester.

I understand that I am responsible for transportation to and from the physical activity program and that the school is not responsible for any contractual agreements with the trainer or coach.

I understand that this application is not complete until I attach the required forms pertaining to the agency providing the physical activity, trainer/coach, and training plan. Also, I must submit updated forms if there are changes regarding the agency, trainer/coach, or training plan.

I understand that the Superintendent must approve the application. In addition, applications for High School substitutions must be presented to the School Board and Texas Education Agency.

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

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### FOR OFFICE USE ONLY

Parent Form Received	Date:	Training Plan Received	Date:
Agency Form Received	Date:	Presented to School Board, if required	Date:
Superintendent's Decision	Granted	Denied	Signature & Date: