

Physical Education Exemption Form



Daily physical activity is a key component of a healthy lifestyle. Midland Public Schools (MPS) requires all high school students to take *Lifelong Fitness*, a one semester course, to learn about healthy physical activities and how to implement them at all ages. Most students take this during the ninth grade. This course meets the state of Michigan required .5 Physical Education credit for graduation.

If you are unable to take *Lifelong Fitness*, you may request an exemption from the state requirement if you participate in either a sponsored high school team (see below list) or a full year of the high school marching band. To receive the exemption, fill out the form below electronically, and then print for signatures and to submit to your counselor.

This form is due to your counselor by July 1. It is recommended that you complete the form and obtain signatures immediately at the end of the school year (band) or season (sports).

Note: Lifelong Fitness is still a prerequisite for other PE classes.

Student Name

Graduation Year

I certify that access to a course required by my EDP (4-Year Plan) prohibits adding Lifelong Fitness to my schedule. To meet the PE requirement, I participated in a high school sport or a full year of marching band as indicated below.

I participated as a team member, in good standing, in the following:

- | | | |
|--|---|--|
| <input type="checkbox"/> Baseball | <input type="checkbox"/> Football | <input type="checkbox"/> Softball |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Hockey | <input type="checkbox"/> Swimming |
| <input type="checkbox"/> Bowling | <input type="checkbox"/> Lacrosse | <input type="checkbox"/> Tennis |
| <input type="checkbox"/> Competitive Cheer | <input type="checkbox"/> Pom Pon | <input type="checkbox"/> Track and Field |
| <input type="checkbox"/> Cross Country | <input type="checkbox"/> Sideline Cheer | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Golf | <input type="checkbox"/> Soccer | <input type="checkbox"/> Wrestling |

Coach Signature

Date

Athletic Director Signature

Date

OR

- ☐ I participated in the marching band as part of my year-long Symphonic Band or Concert Band class.

Teacher Signature

Date

Assistant Principal Signature

Date

Student Signature

Date

Parent Signature

Date

Counselor Signature

Date

Counselor's signature indicates approval.
Counselor will note on transcript.
Counselor will add to CA-60.