



**COLUMBUS CITY SCHOOLS**  
**Physical Education Waiver Application**

**BOARD OF EDUCATION POLICY 5460**

Students who have participated in interscholastic athletics, marching band, show choir or cheerleading for at least two full seasons while enrolled in grades 9 through 12 may be excused from the high school physical education requirement. Students electing such an excuse shall complete one-half unit of at least sixty hours of instruction in another course of study which is designated by the Board as meeting the high school curriculum requirements.

**CLARIFICATION:** Ohio law requires JROTC students requesting the PE Waiver to have participated in JROTC for two years. The state's waiver for marching band was based on the outside-of-class activities associated with marching band programs and will not be granted for marching band practice during the band class the is part of the school day.

**NOTES:** An approved waiver does not grant the student 0.5 credit; it only excuses the student from physical education. Ohio law does not obligate Columbus City Schools to honor PE waiver earned in a prior district by a transfer student.

**Directions:** Read and complete the front of this form providing all information and required signatures and submit to your guidance counselor.

Student's Full Name: (Please Print) \_\_\_\_\_  
Last First MI

CCS Student ID# \_\_\_\_\_ Home High School \_\_\_\_\_

I hereby declare my intent to utilize the Physical Education graduation requirement exemption.

I understand that the following conditions apply:

- I must have successfully completed two full seasons (between my freshman year and fall of my senior year) of any the eligible activities, or two years of JROTC participation, to be exempt from the PE requirement.
- Successful participation completion will be determined and certified by the coach, director, or advisor and approved by the Athletic or Band Director. (Ohio statute requires participation "for at least two full seasons." The season during which a student was "cut" or quit the activity may not be used to meet the two-season requirement.)
- The waiver provides no actual credit on my high school transcript. I must still earn at least 22 credits for graduation.

The above name student participated in the following activities to meet the PE waiver requirement.

Activity 1: \_\_\_\_\_ School Year \_\_\_\_\_

Coach/Advisor/Director Signature Required: \_\_\_\_\_ Date \_\_\_\_\_

Athletic or Band Director Signature Required: \_\_\_\_\_ Date \_\_\_\_\_

Activity 2: \_\_\_\_\_ School Year \_\_\_\_\_

Coach/Advisor/Director Signature Required: \_\_\_\_\_ Date \_\_\_\_\_

Athletic or Band Director Signature Required: \_\_\_\_\_ Date \_\_\_\_\_

Please sign and date:

\*Parent \_\_\_\_\_ Date \_\_\_\_\_

\*Student \_\_\_\_\_ Date \_\_\_\_\_

Student's Full Name: (Please Print) \_\_\_\_\_  
Last First MI

CCS Student ID# \_\_\_\_\_ Home High School \_\_\_\_\_

School Administrative Purposes to be completed at the beginning of the junior's second semester:

I have reviewed the above named student's participation in interscholastic athletics, marching band, show choir or least two full seasons while enrolled in grades 9 through 12 may be excused from the high school physical education requirement.

Counselor's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Counselor's Printed Name: \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
To be completed by the district's representative:

I hereby recommend \_\_\_\_\_ for a PE Waiver based upon satisfaction of all requirements.

District Representative's Signature \_\_\_\_\_ Date \_\_\_\_\_

District Representative's Name \_\_\_\_\_ Date \_\_\_\_\_

If all of the above conditions have been satisfied, the student is eligible for the Physical Education waiver under Ohio Revised Code 3313.603 and Columbus City Schools Board of Education Policy No. 5460. This worksheet should be filed, with all supporting materials (documentation of approved activities), in the student's permanent record and maintained, subject to the local public-records destruction schedule.

Student's PE Waiver Application has been denied.

\_\_\_\_\_ Lack of supporting documentation please specify.

District Representative's Signature \_\_\_\_\_ Date \_\_\_\_\_

District Representative's Name \_\_\_\_\_ Title \_\_\_\_\_