

GALENA PARK INDEPENDENT SCHOOL DISTRICT
ELEMENTARY PHYSICAL EDUCATION RESTRICTION

The physical education program is designed to meet the needs of all students who are physically able to attend school. Students who need modified or restricted assignments are encouraged to participate in the activities within the range or their capacity as indicated by the physician's diagnosis and recommendations.

This certifies that in my professional judgment,

Student: _____ Home Address _____, School: _____

_____, may participate in the activities checked below from, _____
to _____ because of (cause of restriction) _____

FULL PARTICIPATION:

- | | | |
|------------------|--------------------------|---------------------|
| _____ Aerobics | _____ Dodge Ball | _____ Softball |
| _____ Basketball | _____ Health Instruction | _____ Kickball |
| _____ Exercises | _____ Isometrics | _____ Hula Hoop |
| _____ Football | _____ Rhythms | _____ Track & Field |
| _____ Free Play | _____ Soccer | _____ Tumbling |
| _____ Scooter | _____ Gymnastics | _____ Volleyball |

LIMITED PARTICIPATION:

_____ Score Keeper _____ Time Keeper _____ Walking / Stairs

COMPLETE RESTRICTION:

Type of permissible activity: _____
I realize, and I have interpreted to the family, that physical education is required by the state law and continued absence from physical education will result in no credits in the course toward graduation.

Approved:

School Principal

Physician's Signature

School Nurse

Physical Education Teacher