SACHEM H.S. EAST / NORTH CAMPUS SECONDARY PHYSICAL EDUCATION ACTIVITY FORM

TO:	Dr		Date:		
RE:					
	Name of Stud	dent	Grade	P.E. Teacher	
instru This i to me	nection in Physical Educ means that a pupil who bet his/her needs and/or	ation. These courses with is unable to participate improve his/her conditional three times per week.	Il be adapted in the entire on. The Phy	to meet individual pup program may have his/l	il needs when possible. ner activities modified
The f	following is a general li	st of activities included	in the Physic	al Education program:	
PLE <i>A</i>	ASE CHECK THE AC	TIVITIES IN WHICH T	THIS PUPIL	<i>MAY</i> PARTICIPATE.	
() Arch () Badı () Basl	minton	() Cricket () Dance () Football () Golf () Lacrosse () Long Distance/Mile Run () Walk Mile () Physical Fitness	() Soccer () Softball () Swimming () Table Tenni () Tae Bo () Team Hand () Tennis		() Track and Field () Volleyball () Walking () Weight Training Only () lower body () upper body () Wellness/Stress Mgmt
climbir You m	ng (upper/lower body strength ust be able to do all activities a	rently enrolled in Project Adven activities). There is a canoeing at all times.	unit involved for	this course. This is a water act	ivity. This is a full year course.
Stude	ent's Diagnosis:				
This i he/sho wish	is to certify that I have e should participate on the patient to return to	examined the above nar ly in the activities that a you for re-evaluation?_	med student of the checked for the DATE	on or a period of Then may student return	and recommend that weeks. When do you to full P.E.?
Addit	tional Remarks:				
	Physician's Signature				e
				Address	

Please return to **School Nurse**