

**NORTH SALEM HIGH SCHOOL  
PHYSICAL EDUCATION DEPARTMENT**

**REQUEST FOR ATHLETIC OPTION**

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date: \_\_\_\_\_

Sport: \_\_\_\_\_ P.E. Teacher: \_\_\_\_\_ Class/Period: \_\_\_\_\_

1. Junior and Senior athletes are eligible. Must pass Physical Education for the 1<sup>st</sup>, 2<sup>nd</sup> or 3<sup>rd</sup> marking period with a minimum of 85.
2. This request form must be signed by the student-athlete, parent, Physical Education teacher, coach and Athletic Director.
3. The student-athlete must attend class until team rosters are submitted to the Director of Athletics and he/she is notified by their respective Physical Education teacher.
4. Due dates for the Varsity Option Request form are as follows:  
Fall Sports: September 7, 2018  
Winter Sports: November 19, 2018  
Spring Sports: March 18, 2019

**\*\*Forms submitted after the due date will not be approved.**

5. Student-athletes who are approved for this option will be excused from Physical Education during their respective season.
6. Athletes must return to class at the conclusion of their season. Student-athletes failing to return to class will not be eligible for Varsity Option for the remainder of the school year.

Grading System:

Return to class at conclusion of season - P = 100

1 Day Late – P = 85

2 Days Late – P = 70

3 Days Late – F = 60

Failure to return to class - F = 50

7. Students who quit or are dismissed from the team must report to Physical Education for the next scheduled class. Failure to return to class will result in failing Physical Education for the quarter.
8. Students who become academically ineligible during the season must report back to PE immediately and actively participate. Failure to do so will result in the forfeiture of varsity option and failing PE for the quarter.
9. Student-athletes will receive a grade of P or F on their report card.

We have read and understand the requirements of the Athletic Option Program.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Coaches Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Physical Education Teacher Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Director of Physical Education and Athletics: \_\_\_\_\_ Date: \_\_\_\_\_