

Student Directions:

- 1) Complete top half of form and submit to school for approval.
- 2) The form will be returned to you marked as either *APPROVED* or *DENIED*.
 - If *DENIED*, resubmit with corrections for approval.
- 3) At the end of the season, complete signatures at **bottom** of form and submit to school to receive PE credit.

SCHOOL USE ONLY:

APPROVED _____
DENIED _____

**Summit Preparatory Charter High School
 Formal Plan for Outside Physical Activity Form
 2009-2010 School Year**

Please use this form if you plan on completing all or part of your Summit PE hours through an activity other than a Summit sponsored varsity or intramural sport OR the Riekes Center for Human Enhancement.

Session (circle one): **Semester 1** **Intersession 1** **Semester 2** **Intersession 2**
 Aug 24 - Dec 18 Jan 4 - Jan 29 Feb 1 - May 14 May 17 - Jun 11
 2009 2010 2010 2010

*** COMPLETE A SEPARATE FORM FOR EACH TIME PERIOD ***

Student: Student name written exactly as in Power School Mentor: don't forget this!

Parent/Guardian: _____ Phone: _____

Parent/Guardian Email: _____
 * list location where the activity takes place *
 Name of Activity: crew or dance or gymnastics or the like complete this section & turn into MENTOR

Supervisor/Coach: write legibly here Phone: _____
 Supervisor/Coach Email: write legibly before the first day of the circled session

Number of hours per week expected to participate in this activity for the session _____ hours/week

Total Number of hours expected to participate in this activity for the session _____ hours/session

Do Not Detach Here

If approved, please return to school with signatures by the Season due date (Semester 1: Dec 31 / Intersession 1: Feb 11 / Semester 2: May 28 / Intersession 2: Jun 25) ← # hours if same as above

By signing below I attest that the above hours are factual and were completed by the listed student, OR if the student completed less than the hours set forth above, I attest that the student completed total hours.

 Signature of Student

 Date

 Signature of Parent/Guardian

 Date

 Signature of Supervisor/Coach

 Date

hours if different than approved amt. complete after session is over & give to MENTOR

SIGN AFTER ALL HOURS FOR THIS ACTIVITY ARE COMPLETE