



PHYSICAL EDUCATION CREDIT APPLICATION

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STUDENT INFORMATION

Name:		Date:	
First day of the 9 week requirement		Last day of the 9 week requirement	

CHECKLIST

- Be sure you met the attendance minimums and grade requirements
- Attach the 2 page paper as required (see requirement 7)
- Complete the hours log & attach required documentation
- Sign the policy acceptance (both student and parent/guardian - students 18 years and older only need on signature)

PE FOR CREDIT POLICY ACCEPTANCE

I have read the requirements for Physical Education Credit as provided by LAVA. I understand that credit will only be granted by LAVA if all of the conditions required for credit are satisfactorily met. I also understand that this program is being offered as a service to students and is entirely voluntary. I also understand that I take full responsibility for all physical/health risks as well as any costs associated with the physical activities that my student participated in.

Student Signature: _____

Date: _____

Parent Signature: _____

Date: _____

VERIFICATION OF HOURS

List all Qualifying Hours Below			For Office Use ONLY		
Date	Start & End Times	Total Hours	Initials	Date	
					<input type="checkbox"/> 123 hours completed <input type="checkbox"/> Dates within the 9 week term <input type="checkbox"/> Full-time student <input type="checkbox"/> Finished at least 2 classes within 9 week period <input type="checkbox"/> Passed ALL classes with C or better <input type="checkbox"/> Completed written assignment <input type="checkbox"/> Credit added to student's transcript Date Completed: _____ Signature: _____
Total Hours					
Must be greater than or equal to 123 Hours					