

DAILY PHYSICAL EDUCATION WAIVERS OR MODIFICATIONS: Application Addendum

Please provide the following information about your current physical education program and the program as it would be implemented under the proposed waiver or modification. The Illinois State Board of Education will use this information to determine whether a request provides equal opportunities for learning, assists students in achieving the Illinois Learning Standards for Physical Development and Health (Goals 19 – 21), or meets any of the reasons for denial outlined in the waiver law. (For further details, see 105 ILCS 5/2-3.25g and September 28, 2001, memorandum titled “Education Programs and Physical Education Waiver Requests”.) If you have any questions about this form, please call Shelley Helton or Winnie Tuthill at 217-782-5270.

1. **Current Physical Education Program** (first-time applicants only): _____ days @ _____ minutes per session.
(number) (number)

Briefly describe the current physical education program and its links to the Illinois Learning Standards for Physical Development and Health (Goals 19 – 21).

2. **Proposed Physical Education Program.** Describe the following for the program to be implemented under the request.

- | | 1 | 2 | 3 | 4 | None |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Frequency of physical education (days per week): | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Length of each session (in minutes): _____ | | | | | |
| c. Grade levels affected (i.e., receive less than daily instruction or exempted from physical education): _____ | | | | | |

Check one: **All Students At That Grade Level(s)** **Only Students Meeting Criteria** (sports, other courses, etc.)

3. **Student Achievement.** Describe the assessment method(s) used to determine students' achievement levels relative to the Illinois Learning Standards for Physical Development and Health, Goals 19— 21 (see <http://www.isbe.state.il.us/ils/lresources.html>). If possible, provide the most recent test data available for those students who will not be participating in physical education if the request is approved. If that information is not available, then indicate the grade level(s) that participated in the assessment and when the assessment was conducted.

4. **Equal Opportunities.** Briefly describe how students who will participate in physical education on a less-than-daily basis or who will be exempted from physical education under certain circumstances will be provided the equal learning opportunities necessary for them to make progress in achieving the Illinois Learning Standards for Physical Development and Health, Goals 19 — 21.

5. **Additional Support for the Request.** Provide any other information, not described on the application, about the request that will help the State Board of Education understand what the district wants to do and the anticipated effects of the proposal.