



# **GCCISD OFF CAMPUS PE WAIVER**

**Application/Permission Form**

**Commercial Establishment Information**

**Attendance/Grade Form**

**Process Steps**

**Contact Information:**

**[Lee.Martinez@gccisd.net](mailto:Lee.Martinez@gccisd.net)**

**Athletic Director**

**PLEASE REMEMBER STUDENTS MUST REAPPLY FOR AN OFF  
CAMPUS PHYSICAL EDUCATION WAIVER EACH SCHOOL YEAR  
TO BE CONSIDERED FOR THE PROGRAM**



**LEE MARTINEZ**  
Director of Athletics

Lee.Martinez@gccisd.net  
Office: 281-420-4680

To: Secondary School Counselors  
From: Lee Martinez, Athletics  
Subject: Off-Campus Physical Education Policy and Process Steps

Enclosed are the forms that you will need to initiate the process for Off-Campus Physical Education for the interested students in your building. The local school board policies that reference this opportunity are enclosed along with the process steps and needed forms.

Please remind the students and parents that the process is not complete until my signature is on the bottom of the "Application Form Off-Campus Physical Education Commercial Establishment" and the "Off-Campus Physical Education Application/Permission form Parent/Guardian."

Thank you for your assistance with this process. If you have any questions, I am available by phone at 281-420-4680, email, or I am located at the service center at 2200 Market St.

Thank you for your time and consideration in this matter.

Sincerely,

A handwritten signature in black ink, appearing to be 'Lee Martinez', with a long horizontal line extending to the right.

Lee Martinez

**GOOSE CREEK CISD**  
**OFF CAMPUS PHYSICAL EDUCATION**  
**APPLICATION/PERMISSION FORM**  
**PARENT/GUARDIAN**

**Current School Year: \_\_\_\_\_**

This will serve as my request that the Goose Creek Consolidated Independent School District grant physical education credit for the (Fall)(Spring) semester(s) for the 20\_\_-20\_\_ school year to my (son)(daughter) currently enrolled in grade \_\_ at \_\_\_\_\_ school.

My child will be meeting the state and local requirements for physical education at the following commercial establishment:

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_

Please do not assume approval until this form is complete with signature of Goose Creek personnel. My child's instructor will be \_\_\_\_\_. The instructor is aware of this request. I understand that my high school student will receive credits on the basis of one-half credit per semester, and credits earned will depend on the graduation program my child is currently working toward (one and one-half for the recommended and distinguished academic programs and up to two for the minimum program). Junior High requirements may also be met through participation in approved off-campus programs. The grade earned will be pass/fail. I have been informed that if for any reason my child does not complete the entire semester, he/she will not receive partial credit. Furthermore, I acknowledge that the Goose Creek Consolidated Independent School District will not provide transportation to or from the establishment does not endorse any commercial training program, and the approval of this application does not constitute assurance as to the qualifications of the instructors or to the quality and safety of the equipment and facilities.

The undersigned being the parent or legally appointed and qualified guardian of \_\_\_\_\_, a student in the Goose Creek Consolidated Independent School District, does hereby consent to said student participation in this commercial training program. I further agree to hold the Goose Creek CISD, its Board of Trustees, administration, and/or faculty harmless from all liability for any injuries, which said student, may receive while participating in this program or while traveling to and from such program. I also understand that if my child is excused from the first period of the day, arrival time on campus should be within 10 minutes prior to the second period bell; furthermore, if my child is excused the last period of the day, departure time should be within 10 minutes after the tardy bell for the last period class.

Signature of Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_

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**GOOSE CREEK CISD ACTION ON REQUEST**

Yes (  ) No (  ) The activity and commercial establishment are on the approved list

School Counselor: \_\_\_\_\_ School Principal: \_\_\_\_\_

Signature of GCCISD Athletic Director: \_\_\_\_\_

**GOOSE CREEK CISD**  
**APPLICATION FOR OFF CAMPUS PHYSICAL EDUCATION**  
**COMMERCIAL ESTABLISHMENT**

Current School Year: \_\_\_\_\_

Commercial Establishment : \_\_\_\_\_

Address: \_\_\_\_\_

Phone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_ E-Mail: \_\_\_\_\_

Owner/Manager: \_\_\_\_\_

Request for (Student's Name): \_\_\_\_\_

Grade: \_\_\_\_ School: \_\_\_\_\_

After reading the Goose Creek Consolidated Independent School District's Policy regarding Off-Campus Physical Education, the physical education program at this address is qualified as:

Level 1 ( )    Level 2 ( )

This program has been available at this address for \_\_\_\_ years.

Fall Semester Dates, from \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Spring Semester Dates, from \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Instructional Schedule – Day(s) and Time of Participation: \_\_\_\_\_

Instructor: \_\_\_\_\_

Qualifications: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Limit on Death Claim: \_\_\_\_\_

Limit on Personal Injury Claim: \_\_\_\_\_

I understand that it is the responsibility of this commercial establishment to maintain the physical education program as described above and to provide the Goose Creek CISD with all necessary information regarding the program. Any changes in the program, student's enrollment, and/or attendance must be provided to the Goose Creek CISD within 3 weeks of said changes or establishment will be dropped from approved list.

Signature: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**RETURN FORM TO CAMPUS COUNSELOR**

## **GOOSE CREEK CISD**

### **LEVELS OF PROGRAMS: GCCISD SCHOOL BOARD POLICY**

**GCCISD recognizes the following two levels of programs:**

- 1. Programs that lead to Olympic participation, competition, or professional dance training. These programs involve approximately 15 hours per week of highly intense, professionally supervised training. The training facility, instructors, and the activities involved in the program must be certified by the Superintendent or designee to be of exceptional quality.**  
**Secondary students qualifying and participating at this level may be dismissed from school one period (approximately one hour) per day for such participation. Students dismissed shall not be permitted to miss any class other than physical education. [See also FEF]**
- 2. Programs consisting of a minimum of five hours per week. These programs involve high quality, well-supervised instruction given by appropriately trained instructors. Secondary students certified to participate at this level shall not be dismissed from any part of the regular school day.**

**GOOSE CREEK CISD**  
**OFF CAMPUS PHYSICAL EDUCATION STUDENT REPORT**  
**ATTENDANCE/GRADE**

Current School Year: \_\_\_\_\_

**Instructions:**

1. Fill out the entire form on each student
2. Make a copy for your business files
3. Mail original to the student's school/attention Registrar's Office. Attached is an address list for all secondary schools in GCCISD.
4. Return Deadline – this document must be returned within two weeks after the completion of each semester (fill out and return at least twice a year).

Name of Commercial Establishment: \_\_\_\_\_

Instructor's Name: \_\_\_\_\_

Student's Name: \_\_\_\_\_

Student's School: \_\_\_\_\_

Student's Grade Level: \_\_\_\_\_

**Attendance:**

Fall:	# Days Present	# Days Absent	Spring:	# Days Present	# Days Absent
1 <sup>st</sup> 9 Weeks			3 <sup>rd</sup> 9 Weeks		
2 <sup>nd</sup> 9 Weeks			4 <sup>th</sup> 9 Weeks		
<b>Total:</b>					

Grade: (circle one) Pass / Fail

Instructors Signature: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

**Parent/Guardian  
Secondary School  
Off Campus Physical Education  
Process Steps**

**Steps for the Parent/Guardian:**

1. The parent/guardian will initiate this process by requesting their child be given physical education credit for involvement in an off campus program
2. Parent/Guardian will obtain the needed forms and information sheets from the counselor and take them to the commercial establishment:
  - a. Forms:
    - i. Goose Creek CISD Application for Off Campus Physical Education Commercial Establishment
    - ii. Goose Creek CISD Off Campus Physical Education Student Report Attendance/Grade
  - b. Info:
    - i. EIF (Legal)
    - ii. EIF (Local)
    - iii. School Calendar
    - iv. Secondary School Address List
3. Parent/Guardian may be asked to return the Goose Creek CISD Application for Off Campus Physical Education Commercial Establishment form to the counselor. At that time, the counselor will send it to the Director of Athletics for processing.
4. Parent/Guardian will fill out and sign the Goose Creek CISD Off Campus Physical Education Application/Permission Form Parent/Guardian and return it to the counselor. This form is complete when all necessary signatures are on it. One copy will be kept in the student's cumulative folder on campus and one copy will be sent to the Director of Athletics. In addition to the Permission Form, the parent/guardian should receive a copy of the EIF (legal) and EIF (local) policies from the counselor.
5. Parent/Guardian must notify the counselor of changes in location, instruction, time, etc. for their child.

**Counselor**  
**Secondary School**  
**Off Campus Physical Education**  
**Process Steps**

**Steps for the Counselor:**

1. When a request is initiated by a parent/guardian of a student, give the necessary forms to the parent:
  - a. Form:
    - i. Goose Creek CISD Application for Off Campus Physical Education Commercial Establishment
    - ii. Goose Creek CISD Off Campus Physical Education Student Report Attendance/Grade
    - iii. Goose Creek CISD Off Campus Physical Education Application/Permission Form Parent/Guardian
  - b. Info:
    - i. EIF (Legal) (2 copies)
    - ii. EIF (Local) (2 copies)
    - iii. School Calendar
    - iv. Secondary School Address List
2. If the parent returns the Goose Creek CISD Application for Off Campus Physical Education Commercial Establishment form to your office, promptly send it through school mail or email to: [Lee.Martinez@gccisd.net](mailto:Lee.Martinez@gccisd.net) (Director of Athletics)
3. Once the director of Athletics has done the necessary background work needed for approval or non-approval for the commercial establishment, the director will contact the counselor and sign the Goose Creek CISD Off Campus Physical Education Application/Permission Form Parent/Guardian
4. After all necessary signatures are on the Goose Creek CISD Off Campus Physical Education Application/Permission Form Parent/Guardian, make a copy. Retain one copy of the form in the student's file on campus and the other copy through school mail or email to Director of Athletics.
5. When the commercial establishment sends the Goose Creek CISD Application for Off Campus Physical Education Student Report/Grade form to the campus; please make sure it is filed with the registrar's office on your campus.



**Commercial Establishment  
Secondary School  
Off Campus Physical Education  
Process Steps**

**Steps for the Commercial Establishment:**

1. Review all forms submitted to them by GCCISD through the parent/guardian
  - a. Form:
    - i. Goose Creek CISD Application for Off Campus Physical Education Commercial Establishment
    - ii. Goose Creek CISD Off Campus Physical Education Student Report Attendance/Grade
  - b. Info:
    - i. EIF (Legal)
    - ii. EIF (Local)
    - iii. School Calendar
    - iv. Secondary School Address List
  
2. Fill out the Goose Creek CISD Application for Off Campus Physical Education Commercial Establishment form and return it to the Director of Athletics in Goose Creek (Note: The commercial establishment may also send this paperwork with a parent back to the counselor and the counselor will send it Director of Athletics):

***Lee Martinez***  
***2200 Market St.***  
***Baytown, TX 77520***
  
3. The commercial establishment will have knowledge of approval when the Goose Creek CISD Off Campus Physical Education Permission Form is complete with the signature of the Director of Athletics on it.
  
4. The commercial establishment is responsible for filling out and returning the Goose Creek CISD Off Campus Physical Education Student Report Attendance/Grade form, within two weeks after the completion of each semester. This form can be sent directly to the school counselor or registrar. This is why we have provided a school calendar and address list.