



**P.E. Excuse Form**  
**EXCUSE FROM PHYSICAL EDUCATION FORM**  
(813) 346-0400 [PHONE NUMBER] (813) 346-0491 [FAX]

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

Classroom Teacher : \_\_\_\_\_ PE Coach : \_\_\_\_\_

**The purpose of the excuse from Physical Education Form is to excuse your child from participating in class for a set period of time. The excuse from Physical Education Form must be filled out and signed by a parent/guardian. Please give the excuse form to your child's PE teacher.**

Please excuse my child from Physical Education:

- \_\_\_\_\_ Today - Date: \_\_\_\_\_
- \_\_\_\_\_ Today and Tomorrow – Dates: \_\_\_\_\_
- \_\_\_\_\_ For the next three days – Dates: \_\_\_\_\_
- \_\_\_\_\_ Until - Dates \_\_\_\_\_

*A doctor's note is required for any illness or injury lasting more than three days. Please attach your doctor's form to this form( if required) or you may fax the doctor's note to DBES clinic. A doctor's release note is also required when your child may have full participation in PE.*

The reason for the excuse is related to an:

- \_\_\_\_\_ Illness
- \_\_\_\_\_ Injury

Please include more information regarding your child's injury or illness.

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**\*Written assignments will be given to complete during non-participation days.**

**PARENT'S/GURARDIAN'S SIGNATURE:**

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**DATE:** \_\_\_\_\_