



COMMUNITY CHRISTIAN SCHOOL

PO Box 780 • 2701 East Kenwood St • Siloam Springs, AR 72761

PHONE: (479) 549-4141 • FAX: (888) 349-8621

EMAIL: info@ccs-nwa.com • WEBSITE: www.ccs-nwa.com

Date Submitted: _____ Date Approved: _____ Year _____

Application for Approval of Physical Education Credit

Community Christian School of Gentry, Inc. requires all High School students earn a Physical Education credit each year. This credit may be obtained through PE class or an off campus physical activity such as, but not limited to, swim league, dance classes, gymnastics classes, recreation league sports. The minimum number of hours for PE credit is 20. The minimum number of hours for Athletic credit is 40.

Any physical activity under a supervised adult (coach, instructor, teacher, etc., but **not a parent**) for a season. A season is once a week for the school year, or twice a week for half the school year, or three times a week for 3 months, hours must total a minimum of 20 for PE, 40 for athletic credit. Off campus physical activity such as, but not limited to, swim league, dance classes, gymnastics classes, martial arts classes, horseback riding with a trainer, crew, recreation league sports, will be accepted as PE/Athletic credit.

Students who are acquiring their PE/Athletic credit from a source other than Community Christian School of Gentry, Inc., need to submit this form **as well as a log of times and signature of coach for participation** to the school to obtain consideration for credit. Please submit 1 form per student. You may log hours from a smart phone of a free app to document walking/running for 20 hours, but must show logs to obtain credit.

Name of Student: _____ Grade: _____

Activity: (ex: Swimming) _____

Business Location: (Siloam Springs Swim Team): _____

Hours of Participation: (ex: 30 min/wk, 3 x a week, for 4 month) _____

Dates of activity from: _____ to _____

Total number of hours: _____

Print Coach Name and Phone Number: _____

Signature of Coach: _____

Please attach business card for coach/company and log of dates and signatures for practices/workouts/games.

Credit Awarded: _____ Signature of Principal: _____

Each line signifies **30 minutes** or **1 hour** (*please circle one*)

#	Date	Coach signature
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
21		
22		
23		
24		
25		
26		
27		
28		
29		
30		
31		
32		
33		
34		
35		
36		
37		
38		
39		
40		
41		
42		
43		
44		

