

Dauphin County Technical School

Dear Physician,

Students who are attending Dauphin County Technical School are required to take courses, and actively participate, in physical education. Our goal is to have students remain as active as possible when recovering from an injury or illness. Please provide us with information for the student listed below so we may plan appropriate physical activities for the duration of their illness/injury.

Thank you for your assistance.

Student Name _____ Grade _____

Please check or circle all activities that you consider to be appropriate for this student.

<u>Team Sports</u>	<u>Team Sports (Continued)</u>	<u>Fitness Activities</u>
Angleball	Softball	Cardio Machines
Badminton	Soccer	Stair Master
Basketball	Team Handball	Treadmill
Capture the Flag	Volleyball	Bike
Dodgeball		Elliptical
Flag Football	<u>Lifetime/Individual</u>	Weight Machines
Floor Hockey		Upper Body
Kickball/Matball	Archery	Lower Body
Lacrosse	Disc Golf	Moderate walking
Pickle Ball	Bowling	Run/Mile
Rugby (modified)	Yard Games (Indoor/Outdoor)	

-OR-

Please circle if applicable: May not participate in PE on any level

These modifications are in effect from _____ to _____. **(Until further notice is not acceptable)**

Comments:

Date: _____ Physicians Signature _____