



WEST MORRIS CENTRAL HIGH SCHOOL
259 BARTLEY ROAD, CHESTER, NEW JERSEY 07930

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MATTHEW FERRERI, SUPERVISOR OF COLLEGE AND CAREER COUNSELING
JEFF DiLOLLO, INTERIM SUPERVISOR OF ATHLETICS AND ACTIVITIES

Re: Medical Exemption/Physical Limitation

Dear Parent/Guardian,

Date: _____

COMPLETE THIS FORM

Please be aware that our Physical Education program has been amended. This year, any student who is out one month or more will be required to complete a written alternative assignment. The Physical Education Program will be tailored so your child will be able to receive physical education credits while he/she is unable to participate fully due to a medical condition. Also, take note that failure to follow-up with your guidance counselor or physical education teacher may result in loss of credit.

Your physician must complete this form to enable our guidance counselors, physical education teachers, nurses, and administrators the ability to create a program that is appropriate for the student. Please return via Fax.

Heath Office Contacts: Phone#: (908)879-5212 x3490 or x3495 Fax#: 908-879-5460

Physician's Recommendations

Student's Name: _____

Diagnosis: _____

Date of return for physician follow up: _____

Physical Limitations: _____

Activities the student may participate in: _____

(Please refer to the attached Physical Education Activities Guide for Student Participation. Please identify Non-Contact Non-Strenuous/ Non-Contact Strenuous/ Limited Contact/ Contact Sports and/or Written Assignment)

The physician and parent's signature denote consent to fully communicate regarding the care of the student above. The nurse will communicate approximately every month with the physician to ensure the appropriateness of the program designed for him/her as well as update medical excuses that are extended based on medical findings.

Physician's Signature Date Parent's Signature Date

(Office Stamp of physician required for validity)

Physical Education Activities Reference Guide

Please indicate the activities in which the student is cleared to participate. Should the student not be cleared for any Physical Education activities, please fill in *Written Assignment*.

Non-Contact Sports

NON STRENUOUS

- Light Strength Training
- Low Impact Project Adventure
- Ping Pong
- Walking
- Yoga

STRENUOUS

- Archery
- Project Adventure
- Running/Cross Country
- Strength Training
- Tennis
- Track
- Ultimate Frisbee

Limited Contact

- Gymnastics
- Softball
- Team Handball
- Volleyball

Contact Sports

- Basketball
- Floor Hockey
- Football
- Indoor/Outdoor Soccer