

Student Signature

Acalanes Union High School District Independent Physical Education Timecard

Weekly Attendance Timecard

First Name:		Last Name:		
ID #:		School: □ AHS	□ CHS	
		□ LLHS	□ MHS □ ACIS	
Sport/Preferred activity:				
 Maximum of 4 hours of activity may be counted for each day. Contests can be counted for maximum of 3 hours per day. 				
Date	Training Activity (Practice, game, conditioning, e	ining Activity actice, game, conditioning, exercise)		
		,		
	Total Weekly Hours			
	/		1	

To be completed by the student and signed by the parent/guardian on weekly basis. Completed forms should be returned to the Counseling Office weekly. Physical Education teacher will monitor timecards and assign credit.

Date

Parent Signature

Date