

**GUNNISON WATERSHED SCHOOL DISTRICT  
ALTERNATIVE PHYSICAL EDUCATION CREDIT APPLICATION**

The Colorado Academic Standards for Comprehensive Health and Physical Education are skills and concepts that all students must master to ensure success in a postsecondary and workforce setting. The Alternative Physical Education Program allows students to receive high school credit by demonstrating these standards through supervised, organized activity outside of school. Please consult the Colorado Department of Education for details about these standards.

**Criteria**

- Student must be a full-time student in the Gunnison Watershed School District
- Seniors must complete all required hours prior to graduation in order to participate in graduation ceremony
- 80 hours of documented activity time equals .5 credit; 160 hours of documented activity time equals 1.0 credit
- A maximum of 1.0 credit can be earned through the Alternative Physical Education Credit Program, unless otherwise approved by administrator

**Student Expectations**

1. Complete Alternative Physical Education Credit Application
2. Obtain Counselor signature by the drop/add deadline of the semester
3. Complete Physical Education Credit Log showing the dates, times and activities completed
4. Obtain Supervisor signature at end of activity
5. Submit application and completed log to the counseling office prior to the last day of the semester

**Supervisor Expectations**

- Supervise student during activity hours
- Verify student activity hours by signing Physical Education Credit Log at conclusion of activity

Student \_\_\_\_\_ Beginning Date of Activity \_\_\_\_\_  
Supervisor \_\_\_\_\_ End Date of Activity \_\_\_\_\_  
Supervisor Phone \_\_\_\_\_ Date of Submission of Form \_\_\_\_\_

Name of Activity \_\_\_\_\_

Type:                      School Program                      Non-School Program                      Other: \_\_\_\_\_

Location of Activity:    Gunnison High School    Crested Butte Community School    Other: \_\_\_\_\_

Activity Schedule (be specific; list days and times of activity) \_\_\_\_\_  
\_\_\_\_\_

For office use only. To be completed by School Counselor.		
Counselor approval <b>prior</b> to activity _____	Date _____	
Counselor verification <b>after</b> activity _____	Date _____	
Circle Credit Awarded: 1 Credit (160 hours)	.5 Credit (80 hours)	No Credit

