

FOLSOM CORDOVA UNIFIED SCHOOL DISTRICT
Physical Education Activities Recommendation

Dear Doctor,

In compliance with State Education Code, Section 51222, we provide courses in physical education for all students enrolled during the day in secondary schools in this district. Please provide us with the information listed below in order to help us plan an appropriate program for the following student:

STUDENT NAME	GRADE	DATE
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Diagnosis:

Please check the appropriate item or items recommended for the student:

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| <p>___ A. Walking</p> <p>___ B. Jogging</p> <p>___ C. Sprinting/Running</p> <p>___ D. Moderate Activities requiring no running
<i>(shooting baskets, playing catch)</i></p> <p>___ E. Moderate Activities requiring some running
<i>(volleyball, badminton, tennis)</i></p> <p>___ F. Active Games</p> <p>_____</p> <p style="padding-left: 40px;"><i>(soccer, basketball)</i></p> <p>___ Absolutely NO physical participation</p> | <p>___ G. Weight Training Upper Body</p> <p>___ H. Weight Training Lower Body</p> <p>___ I. Upper Body Activities</p> <p>___ J. Lower Body Activities</p> <p>___ K. Physical Conditioning Exercises</p> <p>___ L. No Gymnastic Activities</p> <p>___ M. Other _____</p> <p>_____</p> |
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Comments and/or special modifications for the student:

Is there any reason the student can't dress in gym clothes?

These restrictions should continue until:

Physician's Signature

Telephone

Physician's Name