



## UIL No Pass/No Play Exemption Form

(Only advanced courses may be waived: Pre-AP, AP, Dual Credit)

Student Name: \_\_\_\_\_ Sport: \_\_\_\_\_  
(please print)

All waivers must be approved by the Head of School and will be considered only if the following conditions are met:

1. The student's report card average is below 70% for the course in which a waiver is requested.
2. The student **MUST** make a consistent effort to attend tutoring with the teacher whose course he/she is failing.
3. There **MUST** be a **written plan attached** created by the teacher and student to improve the student's grade(s).
4. Teacher/Parent/Coach signatures required.

**\*\*Student, parent, and coach will receive notification of waiver status via email.**

Course: _____	Grade: <input style="width: 50px; height: 30px;" type="text"/>
Teacher Signature: _____	

Course: _____	Grade: <input style="width: 50px; height: 30px;" type="text"/>
Teacher Signature: _____	

Course: _____	Grade: <input style="width: 50px; height: 30px;" type="text"/>
Teacher Signature: _____	

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Coach Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Approval (Head of School):</b> _____	<b>Date:</b> _____
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Director of Student Services: \_\_\_\_\_ Notification Date: \_\_\_\_\_