Aubrey ISD

Off Campus P.E. Policy
and
Application

Aubrey Independent School District

OFF CAMPUS PHYSICAL EDUCATION PROGRAM REQUIREMENTS

The following basic requirements have been established by the Aubrey Independent School District and the Texas Education Agency. In order for participation to be granted, AISD will follow the guidelines set by the law as stated in Texas Administrative Code (TAC 74 Subchapter B). These requirements must be met and maintained to be eligible for participation in the program.

1. The purpose of the program is to accommodate high school students who are making a serious effort to develop high level capabilities and to allow them to be involved in an Off Campus P.E. (OCPE) program that provides training exceeding that offered in the school district.
2. OCPE programs will be approved for only those students who have been strongly recommended by qualified instructors.
3. Only those students in grades nine through twelve will be eligible for consideration for the OCPE program.
4. Only those students involved in the activities of SWIMMING, DANCE, BALLET, GYMNASTICS, EQUESTRIAN, TENNIS, and GOLF will be considered for the OCPE program. Others (by application) will be considered by the program directors.
5. Student applying for OCPE will be considered under two categories: Category One: These programs typically involve a minimum of 15 hours per week of highly intense, professionally supervised training leading to Olympic caliber performance. The training facility, instructors, and the activities involved in the program are certified by the superintendent to be of exceptional quality. Students qualifying at this level may be dismissed from school no more than one period per day for participation. Students may not miss any class other than physical education. Students participating at this level may receive a maximum of one-half credit per semester.
**Category Two:** These programs are to be of high quality, well supervised by appropriately trained instructors and consisting of a minimum of **5 hours per week**. Students certified to participate at this level **MAY NOT** be dismissed from any part of the regular school day. Students participating at this level may receive a maximum of one-half credit per semester.

6. Students who are participating in the OCPE program for physical education credit **MAY NOT BE ENROLLED IN ANOTHER PHYSICAL EDUCATION CLASS, ATHLETICS, or BAND.**

7. As in all classes, students must meet the 90% attendance rule to earn credit and must follow compulsory attendance laws.

8. Only practice hours may count towards the state required time. Game days and competitions will not count toward the total weekly participation hours.

9. Students participating in Category I activities may be dismissed from only first or last period class.

10. The student and the agency are responsible for showing accountability of skill development, learned physical activity, health concepts, and social development through participation in their selected physical activity.

11. Students must continue to go to their Agency and do alternative learning activities even if he/she is injured. A doctor’s note must be given to the instructor with details describing what the student can and cannot do and when full participation is expected.

12. The records concerning attendance, grades, records of competition, contest results, etc. must be fully completed and forwarded to the program director **by the appropriate due date.**

13. The instructor will be required to report a numerical grade at the conclusion of each school grading period. In addition, a detail grading criteria must be provided to the OCPE director.

14. The instructor must constantly observe and evaluate the student’s attitude, work habits and progress. If at any time the student fails to maintain this high level of performance, the instructor will be expected to contact the program director and withdraw his recommendation. The student will no longer be considered eligible for the OCPE program.

15. The OCPE Director will deduct points for grades turned in late. **5 points per day will automatically be taken from the student’s grade.**
AUBREY INDEPENDENT SCHOOL DISTRICT
OFF CAMPUS PHYSICAL EDUCATION APPLICATION

(Mail completed applications to the Athletic Director or
drop off at the High School Office)

Keith Ivy
Aubrey Athletic Dept.
510 Springhill Road
Aubrey, TX  76227
kivy@aubreyisd.net

Applications received after the first week of school WILL NOT be considered!!

TO BE COMPLETED BY STUDENT:

Name: _______________________________  School: ____________________________

Sex: M _____  F _____  Grade: ___________  Student ID#: __________________________

Parent/guardian: ______________________  Counselor: _______________________

Address: ______________________________  Activity: _________________________

City: __________________Zip: _________ Telephone: _______________________

Home E-mail: ____________________________ (REQUIRED, please keep updated)

I am applying for admission into Off Campus P.E. for ___ Semester I  ___ Category I
(place an X next to the semester and
category requested)

___ Semester II  ___ Both Semesters  ___ Category II

Name of Facility: ________________________  Telephone: _______________________

Address: ______________________________  City: ____________________________

Instructor: ______________________________  Home Phone: ______________________

Instructor E-mail (REQUIRED): ____________________________

To be completed by school official

FOR DISTRICT USE ONLY:

Date rec’d _______________  Rec’d by ____________________________
TO BE COMPLETED BY PARENT AND STUDENT:

PARENT PERMISSION

I have read the guidelines for Off Campus Physical Education and I agree to comply with those regulations. I hereby release the Aubrey Independent School District, its employees, agents, and the Board of Trustees from all claims or liability in any way attributable to this program, including all travel to, from and during the program. I also understand that all liability in case of accident or hospitalization is the responsibility of the parent or of the private or commercial school. The Aubrey Independent School District is not responsible for accident or hospitalization insurance. I understand that the Aubrey Independent School District has no control over the daily activities of the program, quality of the program, or qualifications of the instructor in the program.

My son/daughter, _____________________________ has permission to participate in the Off Campus Physical Education program for _________________________ at ______________________________________________ (Off-campus activity) (Off-campus facility’s name)

Parent/guardian Signature ___________________________________________ Date: _______________________

Student Signature __________________________________________________ Date: _______________________

TO BE COMPLETED AND SIGNED BY THE FACILITY INSTRUCTOR:

TENTATIVE SCHEDULE (REQUIRED)

The student must participate in his/her activity, under professional supervision, a minimum of 15 hours for Category I or 5 hours for Category II each week at one approved agency. The records concerning attendance, grades, records of competition, contest results, etc. must be completed and returned to the athletic director at the end of each six weeks period (calendar attached).

The following schedule must be completed and signed by the instructor before the application will be considered. The instructor/facility should notify the counseling office, 940-668-3900, if a change occurs in the schedule.

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<tr>
<th></th>
<th>Beginning time</th>
<th>Ending time</th>
<th>Activity</th>
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<tbody>
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<td>Monday</td>
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As a qualified professional instructor, your signature verifies the above schedule and recommends this student possesses the ability to potentially develop into an Olympic-caliber performer if Category I.

INSTRUCTOR’S SIGNATURE: ___________________________ DATE: _______________________
Facility  

Instructor’s Name

As a professional instructor, I am aware of the emphasis on program objectives, grading based on performance and attendance established by public education and the Aubrey Independent School District. I understand the problems inherent in a program such as Off Campus Physical Education and the importance of maintaining program integrity. Therefore, I will support the following condition to my approval as an Off Campus P.E. instructor.

1. The instructor will adhere to the district’s guideline for attendance by the student.

2. The student must participate in his/her activity, under professional supervision, a minimum of 15 hours (Category I) or 5 hours (Category II) each week at one facility. All such participation must be under the direct supervision of the instructor.

3. The instructor will keep an accurate record of student attendance.

4. The instructor will forward a numerical grade recommendation based on student performance and attendance as requested.

5. The instructor will submit a written outline of program objectives and activities when requested.

6. The instructor will contact the athletic director at 940-390-3967 or kivy@aubreyisd.net if the student’s attendance becomes irregular.

I understand that the Aubrey Independent School District is accountable for the participation of each AISD student in the Off Campus Physical Education program. I will make every effort to cooperate with the district in their accounting procedures.

______________________________  _________________________
Instructor’s Signature          Date

Instructor’s e-mail: ________________________________
Student’s Name:_____________________
Activity:____________________________

<table>
<thead>
<tr>
<th>Grading Period</th>
<th>DUE DATE</th>
<th># Excused Absences</th>
<th># Unexcused Absences</th>
<th>Numerical Grade (0-100)</th>
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</thead>
<tbody>
<tr>
<td>1st Grading Period</td>
<td>3 days prior to end of the grading period</td>
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<td>2nd Grading Period</td>
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<td>3rd Grading Period</td>
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<td>4th Grading Period</td>
<td>3 days prior to end of the grading period</td>
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Instructor’s Name (print) ________________________________
Instructor’s Signature ________________________________
Date submitted _____________

This form must be received by the appropriate director by the due date given. Points will be deducted from the student’s average, at the discretion of the Off Campus P.E. Director.
Send reports to: Keith Ivy, Athletic Director Aubrey High School, at kivy@aubreyisd.net, mail or fax to the high school.