

FOR DISTRICT USE ONLY
Date Received: _____

**Midlothian INDEPENDENT SCHOOL DISTRICT
OFF-CAMPUS PHYSICAL EDUCATION APPLICATION**

FORM TO BE COMPLETED BY STUDENT: The following information pertains to the current year of participation.

NAME _____ SCHOOL YEAR _____

GRADE: _____ ACTIVITY _____

SCHOOL: (check) _____ high school _____ middle school

PARENT/GUARDIAN _____

ADDRESS _____ CITY _____ ZIP _____

HOME PHONE : _____ (CELL) _____

NAME OF AGENCY OR FACILITY: _____

PHONE NUMBER OF AGENCY OR FACILITY: _____

INSTRUCTOR: (please print) _____ PHONE: _____

1. I am applying for admission into off-campus physical education for the:
_____ fall semester _____ spring semester _____ both semesters
2. Please check one of the **off-campus categories** (category explanation included in the packet)
_____ **Level 1** _____ **Level 2**
3. If accepted into the **Off-Campus Physical Education Program**, I would like the following arrangement used in scheduling the time for off-campus physical education. Check only one of the following options that applies to the **Level 1** program and is subject to the approval of the student's principal:
_____ late arrival _____ early dismissal _____ neither

STUDENT SIGNATURE _____ **DATE** _____

TO BE COMPLETED BY SCHOOL OFFICIALS:

The student is taking this course for physical education credit and he/she will not be enrolled in another physical education class or athletics while participating in the **Off-Campus Physical Education Program**. The student may not transfer from athletics or another physical education class into **Off-Campus Physical Education** after the start of the semester.

COUNSELOR _____ CAMPUS _____ DATE _____

PRINCIPAL'S SIGNATURE _____ DATE _____

SUPERINTENDENT'S DESIGNEE SIGNATURE _____

PURPOSE:

The purpose of the Off-Campus Physical Education Program is to accommodate students who are making a serious effort to develop high level capabilities and to allow them to be involved in a program that provides training exceeding or replacing what is offered in the school district.

PROGRAM REQUIREMENTS:

1. Off-Campus physical activity programs will be approved on an individual basis for those students who are recommended by qualified instructors.
2. Only students in grades six (6) through twelve (12) will be eligible for consideration for the program.
3. The district will offer two categories of participation:
 - a. **Level 1:** these programs involve a minimum of fifteen (15) hours per week of highly intense, professionally supervised training. Students qualifying at this level may be dismissed from one school period per day for such participation. Students dismissed **may not** miss any class other than physical education. **Note:** Only high school students participating at this level may receive a maximum of one-half credit per semester. A total of two credits may be earned toward high school graduation requirements (a half credit as a state elective credit).
 - b. **Level 2:** These programs are to be of high quality, well-supervised by appropriately trained instructors, and will consist of a minimum of five (5) hours per week. Students certified to participate at this level may not be dismissed from any part of the regular school day. **Note:** Only high school students participating at this level may receive a maximum of one-half credit per semester. A total of two credits may be earned toward high school graduation requirements (a half credit as a state elective credit).

The student must participate a minimum of four (4) days during the week (Monday through Friday); plus, an additional day that may fall on either the weekend or during the week. All such participation must be under the direct supervision of the instructor.

QUALIFYING CRITERIA:

The following criteria shall apply for the Off-Campus Physical Education Program:

1. The program shall be registered with the campus principal.
2. Grades shall be reported each marking period to the campus counselor (s).
3. Transportation shall be the responsibility of the parent/guardian (s).
4. The campus principal shall approve each student's annual participation.
5. The campus principal shall work together with the assigned counselor to maintain the administrative procedures to certify student attendance and program authenticity. It is the responsibility of the program instructor to notify the campus counselor/campus principal when a student drops from the program.
6. The Midlothian District and its staff shall be excluded from liability that may develop from the student's participation in these Off-Campus P.E. Programs.
7. MISD reserves the authority to determine the validity/authenticity of any establishment providing off-campus P.E. to its students and may exercise the right to revoke or deny awarding credit should the District and/or its agents find evidence that any information on this application has been falsified.

**OFF-CAMPUS PHYSICAL EDUCATION
PROGRAM PROCEDURES**

1. The student should schedule a conference with the campus counselor who will explain the program to the student.
2. The student receives an Off-Campus Physical Education packet from the campus counselor or on the District website at www.midlothian-isd.net/mhs. (Choose Counselors' Corner or Athletics for a printable copy of the packet).
3. The student and parent/guardian(s) read all information in the packet and complete the appropriate portion of the application form.
4. Both the student and agency instructor complete and sign the appropriate portion of the application.
5. The student takes the form to his/her campus counselor and principal for their signature.
6. The application form must be turned into the campus counselor **prior** to the first school day of the semester for which the student is applying.
7. After checking the application thoroughly, the counselor will file the application with the campus PEIMS coordinator and notify the principal of the student's acceptance into the program. If any additional information regarding the request is needed, the **campus counselor** will notify the student's parent/guardian(s).
8. Each year, a new application must be filed for approval.

COMPLETED BY PARENT/GUARDIAN AND STUDENT:

I have carefully read the Midlothian ISD policy for the Off-Campus Physical Education Program, and I agree to comply with those regulations. I hereby release the Midlothian Independent School District, its employees, agents, and its Board of Trustees, from all claims or liability in any way to this program, including all travel to, and from, during the duration of the program. Furthermore, I understand that all liability in case of accident or hospitalization is the responsibility of the parent or of the private or commercial school of instruction and **not** Midlothian Independent School District's responsibility. Also, the daily activities of the program, quality of the program or the instructor's qualifications are **not** Midlothian Independent School District's responsibilities.

My son/daughter, _____, has permission to participate in the

Off-Campus Physical Education Program

for _____ at _____
(off-campus sport) (off-campus agency)

(Parent/Guardian Signature)

(Date)

If you have any questions completing this application form, please contact the campus counselor's office at the following phone numbers:

Frank Seale Middle School at 972-775-6145
Walnut Grove Middle School at 972-775-5355
Midlothian High School at 972-775-8237

**OFF-CAMPUS PHYSICAL EDUCATION
AGENCY/INSTRUCTOR AGREEMENT**

Agency: _____

Instructor: _____

Address: _____

Telephone: _____

Zip code: _____

The instructor will adhere to the following district's policies for student's attendance in off-campus physical education program:

- >The instructor will keep an accurate record of student attendance.
- >The instructor will contact the campus counselor if a student's attendance becomes irregular.
- >The instructor will submit a written outline of program objectives and activities when requested.
- >The instructor will fax the grade sheet to the appropriate campus or turn in the grade sheet in person to the appropriate person prior to the end of each grading period.

I understand that the Midlothian Independent School District is accountable for the participation of each student in Off-Campus Physical Education. I will make every effort to cooperate with the district's accounting procedures.

(Instructor's signature)

(Date)

Because this approved process is a vital part of your program, please be specific when answering the questions on the next page.

**Midlothian ISD OFF-CAMPUS GRADE REPORT:
TO BE COMPLETED BY THE OFF-CAMPUS PHYSICAL EDUCATION AGENCY AT THE END OF
EACH SIX WEEKS GRADING PERIOD:**

STUDENT NAME: _____ GRADE IN SCHOOL: _____

AGENCY: _____

AGENCY TELEPHONE NUMBER: _____

DIRECTOR OF PROGRAM: _____

Since grades must be reported to the schools in a timely manner, please complete the grade report information and return it to the campus counselors' office on **Monday prior to the end of the grading period**. This allows the appropriate time to post the grade on the student's report card. Plan to drop off or fax the grade sheet to the campus. The fax numbers are listed at the bottom of the page. See the District calendar for grade reporting deadlines.

Please make copies of this form to send for each reporting period. Failure to receive grade sheets in a timely manner may result in denial of off-campus P.E. credit.

Indicate the six weeks grading period (1st, 2nd, etc.) and numeric grade in the space provided.

_____ **Six Weeks** **Numeric Grade** _____

Note:

<u>Grades</u>	<u>Numerical Range</u>
A	90-100
B	80-89
C	75-79
D	70-74
F	Below 70

(Director's signature)

(Date)

You may fax the grade sheet to the following campuses:

Frank Seale Middle School: 972-775-1502
Walnut Grove Middle School: 972-775-8127
Midlothian High School: 972-775-3178