



OFF-CAMPUS PHYSICAL EDUCATION **EQUIVALENT PROGRAM** 

APPLICATION PACKET

### **Houston Independent School District**



### Houston Independent School District

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**Houston Independent School District** 

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It is the policy of the Houston Independent School District not to discriminate on the basis of age, color, handicap or disability, ancestry, national origin, marital status, race, religion, sex, veteran status, or political affiliation in its educational or employment programs and activities.

Dear Parents,

The Houston Independent School District's (HISD) Off-Campus Physical Education Equivalent Program provides an opportunity for students in grades 7-12 to receive credit for participation in an **off-campus, physical education/athletic program**. HISD is authorized by the Texas Education Agency (TEA) to substitute participation in private or commercially sponsored athletic/training programs for the HISD middle school physical education requirement and the state-required high school physical education graduation credit.

Waiver requests will be considered for the HISD middle school physical education requirement and the state-required high school physical education graduation credit according to the TEA Commissioner's criteria for Category 1 and Category 2 physical education waivers. Waiver requests must also meet the HISD criteria, which are designed to ensure the safety and well-being of each student seeking a PE waiver. The Health/Physical Education Department will be responsible for supervising the waiver standards to assure that each student receives a quality, off-campus physical education/athletic program. The Physical Education Waiver program is an approved substitution to meet the Physical Education requirements set by HISD and TEA.

To assist us in making decisions as to whether a waiver may be granted, we will follow the guidelines of TEA in interpreting the law as stated in Texas Administrative Code (TAC) Chapter 74: It is the intention of the Texas Education Agency that the various off campus substitutes for the physical education high school graduation requirement be "appropriate" for Category 2 and of "exceptional" or "high" quality for Category 1. The term "appropriate," implies, among other things, that the substitute activity is in congruence with the Physical Education Texas Essential Knowledge and Skills (TEKS) as closely as possible, if not above and beyond the rigor of the standards.

The HISD Health/Physical Education Department must approve the program, agency, and instructor(s) before the student's application will be approved. A list of approved agencies will be available updated at the end of each school year on the HISD website: http://www.houstonisd.org. If the agency that you are seeking is not on the approved list, the owner/manager must make an appointment with the HISD Manager of Secondary Health and Physical Education. Please follow the suggested steps and return the completed packet Curriculum/Instruction/Assessment Department; Attention: Secondary Health/Physical Education Manager at 4400 W. 18th St. Houston, TX 77092 on or before May 1 for the fall and spring of the following school year. Deadlines will be enforced.

- 1. Verify that the student and agency meet all HISD requirements. (page 3)
- 2. Verify that the Agency is on the district's approval list at www.houstonisd.org.
- 3. Parents, student, counselor and approved Agency Instructor must sign and complete their portion of the application.
- 4. Parents/student must mail completed packet to the Health/Physical Education Department by the deadline dates provided.
- 5. Parents may call the school counselor or the Health/Physical Education department after one to two weeks to confirm that the off campus physical education waiver was approved and schedule changes have been made. Students will receive a phone call from their counselor if their application was denied and make schedule changes that are needed.

6. Attendance and grades must be turned into the student's counselor at the end of each grading period by the agency.

All applications will be carefully considered; however, completion of the application **does not** guarantee District approval to participate in the Off-Campus Physical Education Equivalent Program. The student's counselor or designee will receive notification of approval or denial of the waiver request approximately one to two weeks after the Health and Physical Education Department has received the application.

Sincerely,

Rose Haggerty, Manager

Secondary Health and Physical Education

Rose Haggei

713-556-6891

713-556-6898 (fax)

#### REQUIREMENTS FOR THE PHYSICAL EDUCATION WAIVER PROGRAM

#### **Student Requirements**

- 1. All documentation from parents, agency/instructors, and counselors must be submitted by the required deadlines, which are on or before May 1 for the fall and spring semesters of the following school year. Delinquent information will result in denial of the waiver request.
- 2. The student must meet **all criteria** for either Category 1 or Category 2 as set forth on page 3 of this packet.
- 3. Students are required to participate at <u>least 15 hours per week for Category 1 and 5 hours per week for Category 2</u> during the school semester. The instructor is responsible for attaching documentation to verify the student's hours of participation and attendance for each week of the six-week reporting period. Students must attend at least 90% of the time for each grading period to receive a passing mark.
- 4. Students in grades 7 or 8 may receive a maximum of one-half credit per semester. In addition, students in grades 7 or 8 approved for participation in an off campus physical education equivalent program will need to make arrangements with the school counselor to complete a six-week health education requirement.
- 5. Students in grades 9-12 may receive a maximum of one-half credit per semester. No more than two credits total may be earned through this program toward state high school graduation requirements.
- 6. Students qualifying and participating in Category 1 may be dismissed from one school period if training for 15 or more hours a week. Students dismissed may not miss any class other than a scheduled physical education class.
- 7. Students may only participate with one agency/instructor at a time. Summer activities will not be counted.
- 8. Students in Category 2 may not be enrolled in a physical education class and the Off-Campus Physical Education Equivalent program at the same time.
- 9. Students must complete a required Physical Education Journal with district-approved topics to show accountability of learned Physical Education Texas Essential Knowledge and Skills (TEKS). These topics will be discussed and assigned by the instructor. Students may be asked to turn in the journal to their counselor, school designee or to the Manager of Secondary Health/Physical Education.
- 10. Students must participate at the approved agency for the entire semester (18 weeks) or transfer into a general PE class to receive .5 credit for Physical Education.

#### **Agency/Instructor Requirements**

- 1. The instructor/agency must set up an interview with the Manager of Secondary Health/Physical Education (713-556-6891) if the name of their agency does not appear on the approval list at <a href="https://www.houstonisd.org">www.houstonisd.org</a>. The agency must provide documentation that is listed on the Agency Checklist before approval will be granted. The Agency Checklist is provided on the HISD website.
- 2. The instructor must be "appropriately trained" for Category 2 or "exceptionally trained" for Category 1 meaning the instructor must provide certification and/or documentation of training and experience in his/her sport or training program, including CPR/AED/FA certification.
- 3. The instructor/agency must show verification of a criminal background check that supports district guidelines.
- 4. The agency must be located within 30 miles of the HISD boundaries.
- 5. Students must be "well supervised" by the instructor, meaning the instructor must be present at all times during the scheduled activity to provide guidance, instruction and safety.
- 6. Instructors must teach and discuss the agreed upon Physical Education TEKS during scheduled practices. The Instructor is responsible for assigning at least one written assignment per week based on the topic of discussion.
- 7. Instructors must provide the required documentation to the student's counselor or school designee by the given deadlines for each reporting period (activity log, hours of participation, attendance and grades).
- 8. Instructors must notify (ASAP) the Manager of Secondary Health/Physical Education and the school counselor, in writing, if the student chooses to no longer participate in his/her chosen program; is not meeting the 90% attendance requirement per grading period; and if appropriate, a change in team roster.
- 9. Instructors must give a mark that meets the guidance of the HISD grading scale. Grades must be recorded on the grade sheet only as **numeric** scores. Letter grades may be marked on individual student assignments, but the teacher must also indicate the numeric value assigned to that letter grade (e.g., B/82). The following conversion table should be used to convert the letter grades to numeric equivalents:

$\mathbf{A} + = 98$	D + = 74
$\mathbf{A} = 95$	$\mathbf{D} = 72$
$\mathbf{A} = 92$	D - 70
$\mathbf{B} + = 88$	$\mathbf{F} = 60$
$\mathbf{B} = 85$	0 = 0
$\mathbf{B} - = 82$	
C + = 79	
C = 77	
C - = 75	

All grades must be submitted to the school counselor by the end of each grading period. Grades turned in late after the second offense will result in the agency being removed from the approved list.

10. Lost participation time due to inclement weather must be made up during the same week. Alternative instruction inside is acceptable.

The HISD Secondary Health & Physical Education Manager will grant or deny instructor and agency petitions based on students meeting the set criteria and certification of both the instructor and agency. In addition, agencies must provide clean, safe environments that provide exemplary supervision of the student and/or athlete. The HISD Secondary Health & Physical Education Manager or district designee will perform unannounced site visits. The Secondary Health & Physical Education Manager may remove instructors or agencies from the approved list for non-compliance with the terms of this document.

#### Criteria for the Off-Campus Physical Education Equivalent Program

Students must meet the following criteria to be eligible for the Off-Campus Physical Education Equivalent Program

### Category 1: Athletic/Training Program for State, National, or Professional Ranking or Olympic Competition.

- Any athletic/training program that is of higher level than the District can provide.
- ➤ The student must participate in the substitute activity that is in congruence with the Physical Education TEKS as closely as possible, if not above and beyond the rigor of the standards (TAC) Chapter 74.
- The student who trains for <u>15 or more hours per week</u> during the school semester is eligible to miss one school period.
- The student must not miss any class other than a scheduled physical education class (usually the first or last period of the day).
- The student must be training for some type of state, national, or professional ranking, or for Olympic competition.

#### Category 2: A Private or Commercially-Sponsored Physical Activity or Training Program

- The student must participate in the substitute activity that is in congruence with the Physical Education TEKS as closely as possible, if not above and beyond the rigor of the standards (TAC) Chapter 74. Examples of certified activities are the following: swimming, diving, dancing, rowing, fencing, equestrian riding, ice hockey, ice-skating, gymnastics, cycling, martial arts, and lacrosse.
- > Recreation leagues will not be approved.
- The student is required to participate at <u>least 5 hours per week</u> during the school semester.
- > Students participating at this level may not be dismissed from any part of the regular school day.

### STUDENT INFORMATION AND DISTRICT APPROVAL FORM

This form must be completed and signed before approval will be considered to acknowledge the understanding of the Off-Campus Physical Education program criteria and requirements.

Student Name:		□ Male	☐ Female		
Parent(s) or Guardian(s) Name:					
Street Address:					
City:		Zip Coo	le:		
Telephone #:	Parent E-mail (if applicable):				
Campus:	Grade Level:	Student	ID#		
Semester: □Fall, □Spring	g, or □Both	School	Year:		
Counselor's Name:		Telepho	one #:		
Fax #:	Counselor's E-mail A	ddress:			
Agency Name:		Telepho	one #:		
Street Address:		I			
City:		Zip Coo	le:		
Website Address (if applicable):					
Instructor Name:					
Instructor E-mail Address:					
Type of CPR/AED/FA Certifica  ☐American Red Cross  Exp. Date:	tion:  ☐ American Heart Ass  Exp. Date:		☐ Other Exp. Date:		

### CHECK THE FOLLOWING CATEGORY THAT YOU ARE APPLYING FOR:

Category 1: Any Athletic/Training Program for State, National, or Professiona Ranking or Olympic Competition. The student who trains for 15 or more hours per wee is eligible to miss one school period. The student must not miss any class other than scheduled physical education class (usually the first or last period of the day Documentation must be submitted to verify training for some type of ranking. (See criteri page for detailed description.)
Category 2: A Private or Commercially Sponsored Physical Activity or Training Program. The student is required to participate at least 5 hours per week. Examples of certified activities are the following swimming, diving, dancing, rowing, fencing, equestrian riding, ice hockey, ice-skating, gymnastics, cycling, martial arts, and lacrosse.
Student Signature Date
Parent/Guardian Signature Date
Principal Signature or Designee (School Counselor) Date
Instructor's Signature Date
Completed packets must be turned into the Health/Physical Education Department on or before May 1 for the fall and spring semester. Delinquent packets will be denied.
For Office Use Only:
Date Rec'd:// Initials:

INDIVIDUAL TRAINI	NG PLAN		
Student's Name:			
Student's School:			
Semester: □Fall □Spr	ring Both	School Year	
Physical Education Wa	niver start date:	Physical Education	Waiver end date
hours of participation	_	it least 15 hours of par	pant to verify at least five ticipation for Category 1. within the same week.
Day of Week	<b>Beginning Time</b>	<b>Ending Time</b>	Activity/Hours
Monday		8	v
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
	Total hours per wee	ek	
counselor if the stude  **Attach competition		changes or if the stude	nt leaves the program.
	he instructor only if the	110	
a copy of the e a publication v or	entry form for state or na which verifies this students	ntional competition for the nt's state or national ath	letic status or rank;
national athlet	ic status or rank		

### RELEASE OF LIABILITY and PERMISSION TO PARTICIPATE IN THE OFF-CAMPUS PHYSICAL EDUCATION EQUIVALENT PROGRAM

I hereby give permission for my child				
I hereby release the Houston Independent School District, its Board of Trustees, the school's employees, agents, and volunteers in both their official and individual capacities from any and all liability, claims, suits, damages or causes of action whatsoever for any property damage or personal injury sustained by my child that may arise in connection with his or her participation in this activity and his or her transportation described above.				
Having read this Release and Permission to	Participate form, I agree to the terms and conditions			
expressed herein. Signed this				
Print/Type Parent or Legal Guardian's Name:				
Parent or Legal Guardian's Signature:				
Home Phone:	Work Phone:			
Print/Type Student's Name:				
<b>V1</b>				
Student's ID #: (if known)	Student's Date of Birth:			
Print/Type Name of Campus:				

### AGENCY CHECKLIST FOR APPROVAL

The Agency must call the Health and Physical Education Department at 713-556-6891 if their name does not appear on the HISD Off-Campus Approval List to set up an interview and provide the following documentation before approval will be granted for the agency and the student.

Contact	Person
Phone #	E-mail
I Holle II	☐ 1. A copy of the criteria of how the instructors for your agencies are "appropriately" or "exceptionally" trained.
	$\square$ 2. A copy of each instructor's certification that will be working with HISD students. This list must remain current.
	□ 3. A copy of a license that clearly substantiates the agency as a training facility of "exceptional quality" for Category 1 (this may include: local, state, or national licensing or acknowledgement of being a training facility capable of training national athletes and/or Olympic level participants) or a copy of a license or documentation that clearly substantiates the agency as a training facility of "high quality" for Category 2.
	$\square$ 4. Documentation of the student's start and end dates of participation. These dates must correspond with the HISD start and end dates for each semester.
	□ 5. A copy of the athletic/training program goals for your agency.
	$\Box$ 6. An outline that describes a typical training session (time spent on: warm-up, activities, cool down, stretches etc.)
	□ 7. A copy of the highlighted Physical Education Texas Essential Knowledge and Skills (TEKS) that your agency will teach to the HISD students. Each grade level or course must be highlighted that reflects the student's grade level or course for which the Physical Education Waiver will substitute. Certain TEKS must be covered for each grade and course before approval will be granted. The PE TEKS are located at <a href="https://www.tea.state.tx.us">www.tea.state.tx.us</a> .
	8. A list of at least 18 topics from the highlighted TEKS that the instructor will be responsible for teaching and discussing during student participation. High school students must have topics from the Foundations of Personal Fitness Course. At least one topic a week must be discussed and a written assignment must be given to the student to be included in their journal. The written assignment shows accountability of the learned TEKS. Students may be asked to show their journal to HISD district personal.
	9. A list of the Student Expectations that HISD and the Agency require to receive a grade. The student must have attended at least 90% of the time and completed 100% of the written assignments for their student journal during each grading period. Other expectations may be included by the agency to receive a grade such as: good attitude, prepared to participate, improvement, etc.). Student expectations must be given to the students and parents at the beginning of each semester.
	□ 10. Applications for approval must be turned in on or before the following dates: May 1 <sup>st</sup> for the fall and spring semesters of the following year.

Rose Haggerty, Manager, Secondary Health and Physical Education

Phone: 713-556-6891 Fax: 713-556-6898 E-mail: rhaggert@houstonisd.org