

NICHOLS UPPER SCHOOL
Physical Education
Independent Study Policy

An Independent Study (IS) is defined as an advanced study in a non-team sport activity offered to juniors and seniors at Nichols. On rare occasions, freshmen and sophomores may be considered. The advanced and intensive instruction and competition occur outside of the school day. It is taken for physical education credit during the off-season in a given individual sport. Participation in an Independent Study must have prior approval by the Director of Physical Education and the Independent Study Committee.

Rationale:

As part of Nichols School mission, we in athletics and physical education are committed to the physical and social development of all our students to prepare them for leadership, life-long learning and service to the community. We feel it is essential for them to learn self-esteem, cooperation with faculty and peers, responsibility for self and to others, and a commitment to Nichols' community through an introduction to and participation in appropriate Nichols sponsored programs. Some athletes who participate on our school teams have opportunity to improve their performance with advanced competition and certified instruction. We feel these individuals will benefit by this advanced instruction and increase their value to the sports programs offered at Nichols.

Requirements:

A student wishing to enroll in an Independent Study for credit must make an appointment with the Director of Upper School Physical Education at least two weeks in advance of the season to discuss his/her area of interest. Consideration of this request will be determined by the following factors:

1. The program is offered by Nichols School.
2. The student is either intending to try-out for the specified sport or is already a current member of a specified team. Year-to-year approval will be based on a student's status and participation as a member of a given sports team.
3. The student must also be in good academic standing to be considered. Failure to maintain a C average or better will result in removal from the Independent Study.
4. The primary purpose of this IS will be to participate and to train and compete at an advanced level in preparation for competing in a Nichols sports program. Future approvals will be based on previous (excluding a first time applicant) performance and adherence to the IS requirements.
5. The time commitment must be of comparable instruction (including competition) to regular team participation at Nichols. **Minimal 6 hours per week.**
6. The program must be competitive (tournaments/competitions, etc.).
7. The student must be committed to achieving a higher standard in his or her chosen sport.
8. A review of the credentials of the instructor(s) for this IS must be conducted.
9. The student is responsible for completing and returning all assignments, reports, assessments, activity logs or any method of accountability deemed necessary by the Director of Physical Education within an agreed upon timeline. Failure to complete these assignments will result in removal from the IS and effect future requests.
10. A student may request an Physical Education IS for one trimester per year.
11. The applicant must be approved by the Independent Study Committee.
12. In the 2019-20 academic year, a Phys Ed IS will be considered for: tennis, golf, crew and squash. If a student will be a member of two (2) Nichols Varsity teams the IS options will broaden to include team sports and sport specific training. However, if after completing an IS from the wider choice range the student does not fulfill the commitment of playing two varsity sports the student will be required to do PE four times/week in the either the winter or spring seasons.

A student must complete the Independent Study Application (available from the Director of Physical Education). Notification of the decision will be made in writing. If permission is granted, the student is responsible for the certifying all instructors, verifying competitions and all required information by the prescribed deadlines.

NICHOLS UPPER SCHOOL INDEPENDENT SPORTS APPLICATION

Student Name _____ Grade _____

Date _____ Independent Study Requested _____

Inclusive dates from _____ to _____

Days and times you will be participating:

M _____ T _____ W _____ TH _____ F _____ SAT _____ SUN _____

Site of Activity _____ Address _____

Instructor Name _____ Work Phone _____

Instructor Email Address _____

Describe the proposed activity and explain why you are making this request:

Describe what assessments and evaluations will be used to satisfy the request:

The following due dates are very important for Independent Study participants:

Independent Study applications received:	Approved by:	Evaluation form due:
Fall betw. 6/2019 – 9/4/19	9/9/19	Friday, 11/1/19
Winter by Fri., 11/1/19	11/8/19	Friday, 2/28/20
Spring by Fri., 3/6/20	3/13/20	Friday, 5/29/20

I have read and understand the Independent Sport Policy. I understand that a completed Independent Sport Evaluation Form (returned to the Physical Education office) is necessary to receive credit towards graduation. If an evaluation form is not received on time, credit towards graduation for that sport season will not be awarded.

***NOTE:** In the event that my family has elected not to be covered by Nichols School Accident Insurance coverage, my parents and I recognize that coverage for any injury will be solely our responsibility and not that of Nichols School.*

Student signature _____ Date _____

Parent signature _____ Date _____

Instructor signature _____ Date _____

cc: Student/Parent
 Instructor

Approved _____

Not Approved _____

Date _____

NICHOLS UPPER SCHOOL
Independent Study
ACCREDITATION FORM

Nichols Student Name: _____

Athletic Program to be accredited: _____

Program Director: _____ Work Phone: _____

Company Name: _____

Address, City, State, Zip: _____

Name of Instructor: _____

Address, City, State, Zip: _____

Work Phone: _____ Home Phone: _____ Email Address: _____

Credentials of Instructor: _____

Philosophy of Program: _____

Primary goals and objectives of program: _____

Why should your program be considered for the Nichols School Independent Study program?

As instructor for a Nichols Independent Study, I understand that I am assuming responsibility for instructing and evaluating Nichols School athletes. I will notify Bobby Ross, Director of US PE, (332-5123, bross@nicholsschool.org) immediately if the above student is not fulfilling his/her requirement of at least six hours of supervised instruction or activity, Monday through Sunday, in the above program.

(signature) _____ (title) _____ (date) _____

INDEPENDENT STUDY EVALUATION FORM

(To be completed by Instructor)

Student Name: _____

Please evaluate the above student on each of the following items as follows: (E) Excellent, (G) Good, (S) Satisfactory, (P) Poor. Please feel free to comment on any of the following criteria.

1. Attitude

Cooperation _____
Willingness to listen _____
Willingness to try new skills _____
Sportsmanship _____
Enthusiasm _____

2. Participation

In practice _____
In competition _____

3. Performance

In practice _____
In competition _____
Skill level _____
Honors or Accomplishments _____

4. Attendance

For practice _____
For competition _____
Usually early, on time or late _____

Comments:

Does this student deserve to receive a "credit or "no credit" grade for this season based on the criteria above?_____. If "no credit" please explain why?

Would you be willing to coach and supervise this student in an Independent Study again?
YES_____ NO_____

Instructor's signature_____ Date_____

Please return at the END of the Independent Study season to:
Bobby Ross, Director of Upper School Physical Education
Nichols School, 1250 Amherst Street, Buffalo, NY 14216-3698
716-332-5123 Fax: 716-332-6315