

# Edmonds School District

## Documentation of Learning Check List for PE Outside Credit

### Instructions for Students

In order for your .5 credit to be approved, it is your responsibility to obtain the necessary signatures, complete all of the required documents, and make \$30 payment.

- \_\_\_\_\_ Off-Campus Instruction Log completed
- \_\_\_\_\_ Student Performance Evaluation completed by coach
- \_\_\_\_\_ OCA completed
- \_\_\_\_\_ Receipt of Processing Fee payment attached
- \_\_\_\_\_ Attach completed Application for Outside Credit form with all signatures

**When complete, turn the packet in to the Main Office for routing to PE Department**

### Instructions for Verifying Teachers

Check that all components of the packet are complete. If incomplete or unsatisfactory, return to the student for completion. Check off each component, sign, and route to the Counseling Office.

- \_\_\_\_\_ Completed Application for Outside Credit form with requisite signatures
- \_\_\_\_\_ Completed instruction log, including requisite number of hours and signatures
- \_\_\_\_\_ Completed Student Performance Evaluation with requisite instructor signature
- \_\_\_\_\_ Verification of payment
- \_\_\_\_\_ Satisfactory completion of appropriate OCA

Signature of PE teacher \_\_\_\_\_

# Edmonds School District #15

## Off-Campus Instruction Log

Student Name: \_\_\_\_\_

Student's school (circle):      EWHS    LHS    MHS    MTHS    SLHS

Name of Instruction: \_\_\_\_\_

Location of Instruction: \_\_\_\_\_

Directions: write the number of hours each day in the correct box. Total number of required hours in the year must equal 90. Use 15-minute increments.

Month/Day	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	TOTAL	
August																																	
September																																	
October																																	
November																																	
December																																	
January																																	
February																																	
March																																	
April																																	
May																																	
June																																	
July																																	

Total number of hours: \_\_\_\_\_ (must be no less than 90)

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

Instructor signature: \_\_\_\_\_ Date: \_\_\_\_\_

Complete the evaluation of the student's work on the back of this page. Your evaluation is crucial to the award of substitute credit.

*(over)*

# Edmonds School District #15

## Student Performance Evaluation

Student Name: \_\_\_\_\_

Student's school (circle):    EWHS    LHS    MHS    MTHS    SLHS

Name of Instruction: \_\_\_\_\_

Location of Instruction: \_\_\_\_\_

Please complete this evaluation after the student has completed 90 hours of instruction.

	Needs Improvement	Adequate	Performs Well	Exceptional	N/A
<b>Appears interested in work</b>					
<b>Arrives punctually</b>					
<b>Follows direction and accepts suggestions</b>					
<b>Demonstrates initiative</b>					
<b>Can work unsupervised</b>					
<b>Uses time efficiently and appropriately</b>					
<b>Has cooperative attitude</b>					
<b>Demonstrates responsible behavior</b>					

To help the student recognize and assess his/her strengths, please address any of the above areas or make additional comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Instructor signature: \_\_\_\_\_ Date: \_\_\_\_\_

***This completed form MUST be returned to the counseling office no later than the last day of the grading period.***

**Edmonds School District #15**  
**Physical Education**  
**Outside Credit Assessment #2**

Name \_\_\_\_\_ School \_\_\_\_\_ Date \_\_\_\_\_

Please answer the following questions using a separate piece of paper. Responses can be typed or legibly handwritten. When the entire packet is complete, please turn it to your Guidance Counselor.

1. Mark is a 25 year old with a desk job. He spends his free time watching television and playing computer games; his overall level of fitness is low. Create a fitness plan for Mark using the FITT principle that would help him improve his levels of fitness.
  
  
  
  
  
  
  
  
  
  
2. Identify 3 community resources related to health and fitness that are available to you now and throughout your lifetime and how you can access each one.
  
  
  
  
  
  
  
  
  
  
3. What would be the easiest lifestyle change that you could make that would improve your current levels of physical fitness and physical activity and why?
  
  
  
  
  
  
  
  
  
  
4. Identify 3 benefits of being physically fit and explain why each is important to you.