

Application for Supervised Curriculum PE (SCPE)

Please return your completed application to the counselor at the school that you will be attending while participating in this SCPE course prior to March 15th.

Please indicate below which semester(s) the student will be participating in SCPE:

Fall Semester - Year _____ Spring Semester - Year _____

Student's Name: _____ Grade next year: _____ Student ID#: _____

School attending next year: _____ Counselor: _____

Declaration of the activity in which the student will be engaged. This activity must be from among those approved by the Douglas County School District. **SCPE is limited to the exemption of 1 PE credit maximum and cannot be taken for elective credit.** Please check the Physical Education activity in which the student will be participating:

Dance (professional training) Figure Skating Skiing or Snow Boarding Equestrian Training

Martial Arts (4th level and above) Rodeo Training Gymnastics CrossFit Training

Club Swimming Club Volleyball Other _____

Any additional sports must be approved by the State Superintendent.

Check one:

- This activity will take place entirely outside the school day (credit may be exempted for activities outside the school day if all requirements are fulfilled).
- This activity will require the student to miss the first or last class period of the day.
(circle one)

Specify any events in which the student will be participating and/or the national and regional competition in which the student will be participating.

1. _____
2. _____
3. _____

Describe the student's background, number of years involved in, and particular interest in this activity.

PROGRAM SCHEDULE

Please indicate by each day of the week, the time the student will be participating in this activity.

Day of Week	Location	Start Time	End Time	Total # Hours
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

This section must be completed by the coach/instructor

Name of business or academy: _____

Address: _____

Name of coach/instructor: _____ Phone: _____

Background/qualifications of coach/instructor: _____

A COPY OF THE PROGRAM SYLLABUS MUST BE SUBMITTED WITH THIS APPLICATION FOR APPROVAL

As a coach/instructor of the above student, I have read, understand, and will adhere to the requirements for SCPE. I agree to directly teach and supervise the student a **minimum of five hours per week** and am willing to fulfill my part of these requirements.

Coach/Instructor's Signature

Date

To the Student:

You are involved in your choice of an activity approved by the Douglas County School District. You may be eligible to be exempted from one credit (one half credit per semester) in PE. The requirements to waive this credit are not extensive or burdensome, but it is necessary for all involved to understand and be willing to fulfill them according to established timelines. All signatures are required before this contract can be approved.

Absences – Participation in competitions, which extend beyond one class period, will be treated as if the student were competing in a NIAA activity. Excused absences will be limited to the equivalent of 8 school days. The waiver for PE credit requires the same attendance as stated in Board Policy and Administrative Regulation 504.

As a SCPE student, I have read and understand the above requirements. I agree to fulfill all requirements. I also understand that if these are not met, I will not receive a PE exemption. I am further aware that if my monthly reports are late I will not be given exemption until all requirements are met.

Student's Signature

Date

To the Parent:

As the parent/guardian of the above named student, I have read and understand all the requirements needed for my child to be exempted for PE credit.

Parent's Signature

Date

School Approval

I have verified that this student meets the qualifications to participate in the SCPE program and that this application is complete with the program syllabus attached.

Counselor's Signature

Date

Syllabus Form
(Syllabus must be attached to SCPE application)

TO BE COMPLETED BY COACH/INSTRUCTOR:

Name of business or academy: _____

Coaching staff: _____

Location: _____

When will instruction take place? _____

Materials required: _____

Purpose, goals, and objectives: _____

Class dynamics: _____

General requirements: _____

Method of evaluation: _____

Content outline: _____

Monthly Attendance Report

(Part 1)

The student is responsible for submitting this report to their counselor each month. This report is due to the counselor by the last day of each month.

Student is participating in the:

Fall Semester - Year _____ Spring Semester - Year _____

Student's Name: _____ Grade: _____

Report date: _____

(Note: Report date is the last date of the month)

Supervised Curriculum Class:

This entire report must be completed. Reports having blank spaces are not acceptable.

Accomplishments made toward goals: _____

Skills developed or activities for this month: _____

List specific participation in performances, shows, or competitions: _____

Attendance at special clinics or taking exams: _____

Suggested grade: _____

Signature of Coach/Instructor

Date

Monthly Attendance Report

(Part 2)

Student is participating in the:

Fall Semester - Year _____

Spring Semester - Year _____

Student's Name: _____ Grade: _____

Report date: _____

(Note: Report date is the last date of the month)

Supervised Curriculum Class: _____

Date	Time Started	Time Finished	Total Time	Coach/Instructor's Signature

Total hours: _____

Signature of Coach/Instructor

Date

Content Standard 2.0: Apply knowledge of concepts, principles and strategies related to movement, performance and safety within physical activities.

Indicator	Grade 9-12
By the end of Grade 12, students know and are able to do everything required in previous grades and:	
Concepts and Principles	2.12.1 Analyze complex skills in a physical activity setting.
Strategies	2.12.2 Analyze strategies used in physical activity settings to improve movement skills.
Safety	2.12.3 Demonstrate safe practices for self and others while participating in physical activities.
By the end of Grade 12, students know and are able to do everything required in previous grades and:	
Moderate to vigorous physical activity	3.12.1 Engage in a variety of moderate to vigorous physical activities.
Establishing Healthy Activity Patterns and Values	3.12.2 Apply lifelong activity patterns through participation in physical activity.
Self-Management Skills	3.12.3 Demonstrate opportunities at school for regular participation in physical activities.