



**2024-2025**

### **Information Packet For Off-Campus Physical Activity Middle School or High School Students (Physical Education substitutions)**

#### **PURPOSE**

The purpose of the **Off-Campus Physical Activity (OCPA) program** offered by Carroll Independent School District (CISD) is to accommodate students in 7<sup>th</sup>-12<sup>th</sup> grades who are making a serious effort to develop high level capabilities and to allow them to be involved in an off-campus program that provides training exceeding that offered in the school district.

#### **PROGRAM DESCRIPTION**

The OCPA program is a cooperative arrangement between the CISD and an approved off-campus sponsoring facility/provider. Activities are defined as those in which a student works with either a single teacher/coach or with a team teacher/coach at an approved agency during the regular school year.

#### **GENERAL REQUIREMENTS**

1. Students in grades seven (7) through twelve (12) will be eligible for consideration for the off-campus program. No students in elementary or intermediate school will be considered for the off-campus program.
2. Students will receive a maximum of one half (.5) credit per semester. (Confirm with your school counselor regarding PE credit requirements.)
3. A student may not participate in the OCPA program if the sport is offered as part of the CISD curriculum unless the student is released from or not placed on a team as part of the school program.
4. Students applying for OCPA will be considered under two categories:
  - **Category I** - this program requires a minimum of **fifteen (15) hours** per week of highly intense, professionally supervised training. Students qualifying at this level may be dismissed from school one period per day for such participation. The student will be required to follow this schedule for the entire semester.
  - **Category II** – This program is to be of high quality, well supervised by appropriately trained instructors, and consisting of a minimum of **five (5) hours** per week. Students participating at this level MAY NOT be dismissed from any part of the regular school day.

#### **OCPA COURSE REQUIREMENTS**

1. Documentation (LOG SHEET) of attendance and OCPA activity must be submitted by stated deadlines. This should be completed by the student, and the OCPA Provider (coach/trainer) will initial/sign each session. The log sheet form is located in the OCPA packet.
2. Documentation (GRADE REPORT FORM) must also be submitted by stated deadlines. The Provider will assign a PASS/FAIL grade and sign the form.
3. Students are responsible for turning in all documentation to their OCPA Coordinator.
4. **If a student fails to meet program requirements (i.e. documentation on logs, turning logs and grade sheets in by due date), student may lose the option of participating in OCPA.**

#### **APPROVED ACTIVITIES (PROVIDERS)**

1. Providers must be approved by the OCPA Coordinators.
2. The list of board approved providers and additional information can be found in the OCPA packet.

## FREQUENTLY ASKED QUESTIONS

**Q What are the approved activities available for OCPA?**

**A** Please see the list of approved activities/providers in the OCPA packet.

**Q Why is there a fee for OCPA?**

**A** This program is optional to students in CISD and the fee is to offset the cost associated with administering the program.

**Q Can an elementary or intermediate student be enrolled in OCPA?**

**A** No, the program is only open to students in grades 7 – 12.

**Q Who changes the student's schedule to reflect OCPA?**

**A** After the application is approved by the OCPA Coordinator and the payment received, the counselor at the student's home campus will change his/her schedule, providing they can create a schedule to accommodate the request to reflect OCPA.

**Q Is travel time included as part of the time requirement?**

**A** No, the student should not include travel time as part of the time requirement. Also, if a student works at the facility he/she may not count work hours towards the time requirement.

**Q Can the student include tournament play/competitions as part of the time requirement?**

**A** No more than 6 hours of tournaments/competitions per week may be included in the time requirements for Category ONE – 15 hours/week.

**Q May the student enroll in the OCPA program for part of the semester?**

**A** Participation must run concurrent with the school semester and continue throughout the entire semester.

**Q Can the student have more than ONE Provider/Activity?**

**A** No, only 1 Activity/Provider may be selected for OCPA. Credit will not be given for a combination of hours for 2 separate activities.

## APPLICATION PROCEDURE

- Student prints an application form (p.4), provider form (p.5 – signed by coach/trainer), and release form (pp.6-7) from the OCPA packet.
- Upon completion, **FORMS** must be mailed or delivered to OCPA Coordinator as listed below. Once the application has been approved, the OCPA payment link to Pay K12 will be emailed to you. Your payment should now be made with a Credit or Debit card. **We must have the forms mentioned above and payment to be enrolled in OCPA.**
- Once the forms have been submitted and the fee is received, a confirmation email will be sent to the parent. The campus Counselor will also be notified. At that time the Counselor will list OCPA as an available option for the student's schedule.
- First semester application/fee must be received by **August 16, 2024** and second semester application/fee must be received by **January 10, 2025**. **No applications will be approved after these dates.**
- **Students will not be enrolled in OCPA until payment has been received and the OCPA paperwork is completed. New OCPA paperwork must be submitted each school year.**
- Once approved the student must sign in/out with the Attendance Office if leaving campus for OCPA.

### FEES:

**An enrollment fee will be assessed for all students participating in OCPA. Payment can be made with a single payment of \$200 for two semesters or \$100 for one semester. Please do not pay with cash/check. The Pay K12 payment link will be emailed to you after your submitted OCPA forms have been approved. Again, fee must be received before a student can be enrolled in OCPA. Refunds will not be processed after October 15, 2024 (Fall semester) or March 10, 2025 (Spring semester).**

### For questions you may contact:

Jenna Chitwood (CMS and DMS students)  
Off-Campus Physical Activity Coordinator  
Carroll ISD  
2400 N. Carroll Ave.  
Southlake, TX 76092  
[jenna.chitwood@southlakecarroll.edu](mailto:jenna.chitwood@southlakecarroll.edu)  
Phone: 817-949-8295

Marsha Vawter (CHS and CSHS students)  
Off-Campus Physical Activity Coordinator  
Carroll ISD  
2400 N. Carroll Ave.  
Southlake, TX 76092  
[marsha.vawter@southlakecarroll.edu](mailto:marsha.vawter@southlakecarroll.edu)  
Phone: 817-949-8295

**CISD Off-Campus Physical Activity Application**

2024 - 2025 Campus:      CSHS                         CHS                         DMS    CMS

2024 - 2025 Grade:     12<sup>th</sup>    11<sup>th</sup>             10<sup>th</sup>    9<sup>th</sup>                 8<sup>th</sup>    7<sup>th</sup> \*7<sup>th</sup> grade must enroll in OCPA for full year

Counselor's name: \_\_\_\_\_

This application is for (check one):    both semesters    1<sup>st</sup> semester only    2<sup>nd</sup> semester only  
\*7<sup>th</sup> grade must enroll in OCPA for full year

This application is to be completed by the parent or guardian. Please provide all information requested.

**Student's Full Legal Name (Please Print):** \_\_\_\_\_

FIRST    MIDDLE    LAST NAME

- I understand that this activity will be considered: (choose only one)
  - Category I (15 hours/week)
  - Category II (5 hours/week)
- The OCPA activity is: \_\_\_\_\_ PROVIDER is: \_\_\_\_\_.
- The name of the trainer/coach is \_\_\_\_\_ and the training will take place at \_\_\_\_\_ training facility.
- I am requesting my student be released from \_\_\_\_\_ (1<sup>st</sup> or last) period (**ONLY if Category I**).
- I UNDERSTAND THAT ACTIVITY LOGS/GRADE SHEET FORMS MUST BE RECEIVED BY THE SPECIFIED DUE DATES OR MY STUDENT WILL RECEIVE A FAILING GRADE AND MAY LOSE THE OPPORTUNITY TO PARTICIPATE IN OCPA.**
- I understand that I am responsible for transportation to and from the physical activity program and that the school district is not responsible for any contractual agreements with the trainer or coach.
- I understand that my student **MUST** have a current Permission and Release form on file.
- I understand that the OCPA fee must be paid before my student can be enrolled in OCPA.

**For office use only:**

Provider approved: \_\_\_\_\_ or \_\_\_\_\_

Letter from new provider: \_\_\_\_\_ & Date \_\_\_\_\_

Provider agreement: \_\_\_\_\_

Supervisor Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Parent contacted: \_\_\_\_\_ Date: \_\_\_\_\_

Payment received: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Parent Signature

\_\_\_\_\_ Student Signature

\_\_\_\_\_ Parent Contact Phone Number

\_\_\_\_\_ Parent E-mail address



**Carroll Independent School District**

2400 N. Carroll Ave.  
Southlake, TX 76092  
Phone (817) 949-8255

<http://www.southlakecarroll.edu>

**CISD PROVIDER AGREEMENT FORM**

**School Year: 2024-2025**

To Whom It May Concern:

This letter is to inform you that \_\_\_\_\_, committing to  
(print student’s full legal name: First, Middle, Last)

Cat. I/15 hrs. activity each week \_\_\_\_\_ Cat. II/5 hrs. activity each week \_\_\_\_\_  
(check student’s designated category of weekly activity time)

has submitted an application to receive Off Campus Physical Activity credit through your program. In order for this student to qualify for this program through the District, you must agree to the parameters set forth by the Carroll Independent School District.

As a provider of Off-Campus Physical Activity you must comply with the parameters identified below. **Please place a checkmark (✓) in each box below to indicate acknowledgement.**

- I agree to structure my teaching in a manner that fulfills the guidelines as developed in the Texas Education Knowledge and Skills (TEKS) curriculum.
- At the request of the student referenced above, I will provide a letter on business letterhead about my program along with contact information for myself.
- I will confirm, with my signature, practice activities and dates fulfilled by the student.
- I also am aware that it is the student’s responsibility to have his/her activity log sheet completed at each session and delivered to his/her OCPA Coordinator at the specified deadlines.
- I agree to give each of my students a Pass/Fail grade on the grade report provided to me by the student on the specified date of each grading period.

I, \_\_\_\_\_, understand Carroll Independent School  
(please print your full legal name on line above)

District’s expectations for the Off-Campus Physical Activity Program. I also understand my responsibility as a supervisor/coach.

Provider’s Signature \_\_\_\_\_ Date \_\_\_\_\_

Provider’s facility address: \_\_\_\_\_

Provider’s E-mail address: \_\_\_\_\_

Provider’s Phone number: \_\_\_\_\_

**CMS and DMS students - Please mail form to:**  
**Carroll ISD Administration Center**  
**Attn: Jenna Chitwood-OCPA**  
**2400 N. Carroll Ave., Southlake, TX 76092**  
**817-949-8295 (phone)**

**CHS and CSHS students – Please mail to:**  
**Carroll ISD Administration Center**  
**Attn: Marsha Vawter-OCPA**  
**2400 N. Carroll Ave., Southlake, Texas 76092**  
**817-949-8295 (phone)**

## **PERMISSION AND RELEASE**

I understand that my child, \_\_\_\_\_, a student at Carroll Independent School District (“District”), is receiving physical education credit for participation in the “activities” otherwise unrelated to the District and off District premises. I understand that my child’s participation in these physical activities is wholly voluntary and the District does not require my child to participate in these types of physical activities. I understand that the District provides opportunities for physical education credit at the District, but I choose to allow my child to participate in an outside physical activity instead of participating in District run physical education.

I understand that my child must comply with the Carroll ISD Student Code of Conduct and any rules and standards of conduct at his/her physical activity location. I understand that my child’s failure to adhere to these rules and standards of conduct may result in discipline in accordance with the Student Code of Conduct and my child’s dismissal from the physical activity.

I understand that the District has no control over the operations or premises of my child’s particular activity. I further understand that my child will not be under the supervision of a District employee but will be under the supervision of a representative of the assigned activity while participating in the activity.

I recognize and understand that there are certain dangers and risks to which my child may be exposed by participating in the activity, including risk of physical injury. I understand that the District does not have medical personnel available at the activity locations. I want my child to participate in the activity despite the possible dangers and risks and despite this Release. I understand that the District assumes no responsibility for any injury, damage, or cost which might arise out of or in connection with the activity. I therefore agree to assume all of the risks and responsibilities that are in any way associated with the activity.

I give permission for my child to obtain his/her own transportation to his/her activity location, whether by driving his/her personal vehicle, driving a vehicle owned by me and/or my spouse, driving a private vehicle provided by a third party, or by riding in a private vehicle driven by a third party (together referred to as “personal transportation”). I agree that I am not entitled to any reimbursement for mileage or transportation costs from the District in transporting my child to the physical activity.

In consideration of the privilege of participating in the activity and the convenience of utilizing personal transportation, the receipt and sufficiency of which is hereby acknowledged, I, by my signature affixed below,

**CARROLL ISD**  
**PERMISSION AND RELEASE – page 2**

individually and by next friend of the above named child, acting for myself, my minor child, my agents, heirs, beneficiaries, trustees, executors, successors, assigns, administrators, attorneys and legal representatives, do hereby **RELEASE, ACQUIT AND FOREVER DISCHARGE** the District, all of its employees, agents, trustees, volunteers, attorneys, and legal representatives, in their representative, official, and individual capacities, of and from any and all charges, complaints, grievances, claims, demands, causes of action, damages, loss, or expense, of whatsoever kind or character, in tort (**INCLUDING NEGLIGENCE OR NEGLIGENT OMISSION**), or in contract, that are created by or arise under state and/or federal statutes, constitutions, and/or the common law, whether known or unknown, which may in any manner arise from or relate to the activity or the use of personal transportation. I hereby waive my rights to institute any action, claim or suit against and/or recover compensation, benefits, or damages from the District and/or the above-described persons and entities, and covenant and agree not to sue any such persons or entities regarding such claims in any court or tribunal and not file or aid in the institution or prosecution of any action, lawsuit, or cause of action (whether or not by direct action, counterclaim, cross-claim, or interpleader) regarding any claim released herein.

My signature below indicates my understanding of this Permission and Release and indicates my permission for my child to participate fully in the physical activity. I have carefully read this Permission and Release before signing it. No representations, statements, or inducements, oral or written, apart from the foregoing written statement, have been made. This agreement shall become effective only upon receipt by the District and shall be governed by the laws of the state of Texas.

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Date

**OFF-CAMPUS PHYSICAL ACTIVITY**  
**IMPORTANT DATES**

|                   |                                    |
|-------------------|------------------------------------|
| September 9, 2024 | (Activity logs due)                |
| October 15, 2024  | (Grades and activity logs are due) |
| November 11, 2024 | (Activity logs due)                |
| December 9, 2024  | (Grades and activity logs are due) |
| February 10, 2025 | (Activity logs due)                |
| March 10, 2025    | (Grades and activity logs are due) |
| April 14, 2025    | (Activity logs due)                |
| May 12, 2025      | (Grades and activity logs are due) |

**Submit Activity Log Sheets per Due Dates**

**Communicate with your Off-Campus Physical Activity Coordinator**

**OCPA Coordinator for Carroll Middle School and Dawson Middle School students:**

**Jenna Chitwood**

**e-mail:** [jenna.chitwood@southlakecarroll.edu](mailto:jenna.chitwood@southlakecarroll.edu)

**OCPA Coordinator for Carroll High and Carroll Senior High:**

**Marsha Vawter**

**e-mail:** [marsha.vawter@southlakecarroll.edu](mailto:marsha.vawter@southlakecarroll.edu)



# OCPA

## Required Paperwork Forms

**\*Blank Log and Grade Forms** are provided.  
Make extra copies for the year

**\*\*Students must submit paperwork by  
due dates to receive credit for semester.**

Submit log by due date to the attention of Marsha Vawter (CHS and CSHS) or Jenna Chitwood (CMS and DMS) to CISD Administration Center, 2400 N. Carroll Ave., Southlake, TX 76092.  
 Log may be scanned/emailed directly to coordinator.

## ACTIVITY LOG SHEET

**For every day of physical activity, please put the date, specific activity and time. The provider must also initial each date.**

|                               |                         |                      |
|-------------------------------|-------------------------|----------------------|
| Student's Name (please print) | Campus                  | Grading Period Dates |
| Activity Site                 | Provider (please print) | Provider's Signature |

| Sunday                   | Monday                   | Tuesday                  | Wednesday                | Thursday                 | Friday                   | Saturday                 | Weekly Hours |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |              |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |              |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |              |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |              |

# CISD Off-Campus Physical Activity Grade Reporting Form

\_\_\_\_\_  
Student's Name (please print)

\_\_\_\_\_  
School

\_\_\_\_\_  
Activity Site

Below are the dates that Grade Reporting Forms are due to the school campus. Forms **MUST** be received no later than 4:00 PM on the dates specified below. Remember to check the appropriate grading period as follows and indicate "P" or "F" for Pass or Fail:

**GRADING PERIOD**

(Please check one)

**\* DATE FORMS DUE TO:**

**Marsha Vawter - Coordinator for CHS & CSHS  
or Jenna Chitwood – Coordinator for CMS & DMS**

- |                          |                                |                         |
|--------------------------|--------------------------------|-------------------------|
| <input type="checkbox"/> | 1 <sup>st</sup> Grading Period | <b>October 15, 2024</b> |
| <input type="checkbox"/> | 2 <sup>nd</sup> Grading Period | <b>December 9, 2024</b> |
| <input type="checkbox"/> | 3 <sup>rd</sup> Grading Period | <b>March 10, 2025</b>   |
| <input type="checkbox"/> | 4 <sup>th</sup> Grading Period | <b>May 12, 2025</b>     |

\* Dates listed on the Grade Reporting form coincide with school calendar

**Activity Grade** \_\_\_\_\_ **(P/F) pass/fail**

\_\_\_\_\_  
Provider's Name (please print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Provider's Signature

\_\_\_\_\_  
Student Signature

**Marsha Vawter (CHS and CSHS)** or  
e-mail address: [marsha.vawter@southlakecarroll.edu](mailto:marsha.vawter@southlakecarroll.edu)  
Mailing address:  
Carroll ISD Administration Center  
Attn: Marsha Vawter-OCPA  
2400 N. Carroll Ave.  
Southlake, TX 76092

**Jenna Chitwood (CMS and DMS)**  
e-mail address: [jenna.chitwood@southlakecarroll.edu](mailto:jenna.chitwood@southlakecarroll.edu)  
Mailing address:  
Carroll ISD Administration Center  
Attn: Jenna Chitwood-OCPA  
2400 N. Carroll Ave.  
Southlake, TX 76092

## CISD - Approved OCPA Providers

| Program   | Provider                         | Contact Person               |            |
|---|----------------------------------|------------------------------|------------|
| <b>Conditioning/<br/>Wt. Training</b><br><b>Limited to</b><br><b>Category II</b><br><b>requires direct</b><br><b>instruction with</b><br><b>trainer).</b> | Absolute Recomp                  | Matthew Pena                 |            |
|   | D1 Southlake                     | Rodney Harris                |            |
|   | FASST                            | Willie Pile                  |            |
|   | Planet Fitness                   | Mariah Wrenn                 |            |
|   | 24 Hour Fitness                  | Robert Manning               |            |
|   | Sanara Yoga & Wellness           | Allison Ellis                |            |
|   | Sunstone Yoga/Cycling            | Jennifer Boncyk              |            |
|   | The Yoga Retreat                 | Ranjeeta Rath                |            |
|   | Top Tier Athletics               | Cole Hickey                  |            |
|   | True Results                     | PJ Tracy                     |            |
|   | <b>Badminton</b>                 | DFW Badminton Center         | Cin Abidn  |
|   | <b>Baseball/Softball</b>         | Baseball Player Dev. Center  | Brad Padia |
| Dallas Mustangs   |                                  | Chad Allen                   |            |
| DBats   |                                  | Jane Murray                  |            |
| Dynasty/Excel Elite Softball (DnD)  |                                  | Scott Blankenship            |            |
| Impact Baseball Club  |                                  | Derek Worley                 |            |
| Redemptive Sports   |                                  | Tommy Whiteman               |            |
| The Athlete DFW   |                                  | Zach Matthews                |            |
| Top Prospects Academy   |                                  | Nick Heitz                   |            |
| United Baseball Club  | Ben Pemberton                    |                              |            |
| <b>Dance</b>  | Ambition Dance                   | Laura Williams/Wendy Jenkins |            |
|   | ANS Rhythmics                    | Ashley Simpson               |            |
|   | Artistry in Motion               | Jillian Teague               |            |
|   | Dana's Studio of Dance           | Dana Bailey                  |            |
|   | Dance Axiom                      | Bryan Ingram                 |            |
|   | Eminence Dance                   | Harry Feril                  |            |
|   | Epicenter for the Arts           | Alia Isringhausen            |            |
|   | Harlan House of Dance            | Lauren Allen                 |            |
|   | Lifesong Studio                  | Kim Franks                   |            |
|   | Majestic Dance                   | Donna Oas                    |            |
|   | Next Step Dance                  | Michelle Stafford            |            |
|   | Premier Ballet Coaching          | Kafia Almayeva               |            |
|   | The Block Community Arts Center  | Jayne Frasier                |            |
|   | The Dallas Conservatory          | Megan Weber                  |            |
| <b>Diving</b>   | GC Divers                        | Krista Klein                 |            |
| <b>Equestrian</b>   | Back-A-Bit Farm                  | Kelsie Pead                  |            |
|   | Backyard Barn                    | John Geist                   |            |
|   | Bridlewood Stables               | Carrie Richmond              |            |
|   | Southlake Equestrian             | Bridget Bello                |            |
|   | Summerhill                       | Amy Greene                   |            |
|   | Top Step Farm                    | Jackie Jackson               |            |
| <b>Fencing</b>  | Gold Blade Fencing               | Lorinda Gomez                |            |
|   | Fencing Institute of Texas, Inc. | Brenda Waddoups              |            |
|   | Pegasus Sword Academy            | Lisa Lambert                 |            |
| <b>Golf</b>   | Altus Performance Academy        | Nick Dunn/Mark Govier        |            |
|   | Cowboys Golf Club                | Britt Sharrock               |            |
|   | Crown Golf                       | Joey Wuertemberger           |            |
|   | Golf Tee                         | Brett Sharrock               |            |

|                         |  |   |
|-------------------------|--|---|
|                         | Grapevine Golf Course<br>Jeff Isler Golf Academy<br>Kevics Golf Academy<br>Kirsten Pike Golf Academy<br>Sky Creek Golf<br>Stephen Aumock Golf<br>Timarron Country Club<br>Trophy Club Golf<br>Vaquero Country Club | Robert Singletary<br>Jeff Isler<br>Kevin Kevics<br>Kirsten Pike<br>Simon Hall<br>Stephen Aumock<br>Dave Baron<br>Kris Miller<br>Richard Hare  |
| <b>Gymnastics/Cheer</b> | Champion Cheer<br>Flawless Gymnastics<br>Metroplex Gymnastics<br>Southlake Gymnastics Academy<br>Spirit Extreme<br>Spirit of Texas<br>Sunbelt Gymnastics<br>Texas Dreams<br>Top Flight<br>US Gold Gymnastics       | James Johnson/Richard Landers<br>Perseus Carter<br>Lisa Alexander<br>Michelle and Mark Seyler<br>Walter Meriwether<br>Brad Vaughan<br>Ron Bartusiak<br>Peggy Davis<br>LeAnn Sweeny<br>Tina Martin |
| <b>Hockey</b>           | Dallas Stars Elite<br>Dr. Pepper Stars Center<br>Nytex Sports Center   | Eric Silverman<br>Jeff Blumer<br>Jennifer/Knute Anderson  |
| <b>Lacrosse</b>         | Southlake Carroll Lacrosse/SCLA<br>Lady Dragon Lacrosse/LDL  | Bruce Frady<br>Rainey Hodgson   |
| <b>Martial Arts</b>     | All American MMA<br>J Tiger<br>Jinho Kim Martial Arts<br>Legends Martial Arts<br>Monaghan's Taekwondo<br>Reveal Martial Arts<br>Southlake Taekwondo/ATA<br>Team Mohler<br>TKD Armor Academy<br>413 Jiu-Jitsu       | Rocky Budri<br>Jang Lee<br>Jinho Kim<br>Jay Nelson<br>Brian Monaghan<br>Adam Spicar<br>Jessica Boyer<br>Kylie Mohler Jones<br>Lal Rana<br>Pedro Rocha   |
| <b>Power Lifting</b>    | Texan Fitness  | Robert Clayton  |
| <b>Rock Climbing</b>    | Movement Grapevine   | Selah Taylor  |
| <b>Rowing</b>           | Founders Rowing Club<br>Dallas Rowing Club<br>Dallas United Crew   | Matthew Naifeh<br>Lauren Centeno<br>Steve Perry   |
| <b>Skating</b>          | Nytex Sports Center<br>Skating School Grapevine<br>Star Center   | Jennifer Anderson<br>Robyn Young<br>Darlene Cain  |
| <b>Soccer</b>           | Allegiance FC Academy<br>Dallas Texans Soccer<br>D'Feeters<br>Evolution Soccer<br>FC Dallas Soccer<br>Fever United Soccer Club<br>Saints Soccer<br>Solar Chelsea ECNL  | Edvaldo Pedro<br>Alex Rozkov<br>Adam Flynn<br>Tommy Johnson<br>Nipper Thorber<br>Kenneth Penn<br>Julia Ermish<br>Derek Missimo  |

|                      |   |   |
|----------------------|---|---|
| <b>Swimming</b>      | Lakeside Aquatics<br>Lifetime Swim<br>Mid-Cities Arlington Swimming<br>North TX Nadadores | Bryan Fisher<br>Heather Maher<br>Brian Dangelmaier<br>Michelle Garner         |
| <b>Target Sports</b> | Archery Insight Training<br>Future Sports   | Jesse Johnson<br>Brett Reed   |
| <b>Tennis</b>        | Dent Tennis<br>KATCH Tennis<br>LH Tennis<br>Southlake Tennis Center<br>Tennis Kevin Lam   | Josh Korinek<br>Bhavesh Chadda<br>Linda Hayes<br>Stephen Poorman<br>Kevin Lam |
| <b>Volleyball</b>    | Attack Volleyball Ventures<br>Drive Nation<br>Excel Volleyball<br>MadSand Volleyball      | Lee Wisener<br>Kori Betulia<br>Sherri Hausner<br>Taylor Robinson              |
| <b>Water Polo</b>    | Cowtown Water Polo<br>Thunder Water Polo  | Keeley Lowery<br>Chris Cullen   |

**\*Other providers may be available. Please contact your OCPA coordinator.**

# For Provider

## **Guidelines for Trainers and Coaches of Students applying for Physical Activities Programs for P.E. Substitute Credit**

**(Please give to Provider)**

For a student to receive P.E. Substitute Credit for participating in your training program the following must be submitted to the CISD Off-Campus Physical Activity Provider or designee:

1. A letter on Business Letterhead stating: (if new provider)
  - The purpose of the program
  - A typical weekly schedule for training and competition
  - A description of the type and intensity of the program
  - The levels of competition involved
  - Other pertinent information to include:  
Name, address, email address, phone number of trainer and training facility.
2. A signed Provider agreement accepting responsibility for the grading procedure.
3. A grade report (Pass/Fail) for each grading period. This must be submitted to the OCPA Coordinator for placement on the student's report card.
  - If the grade is not reported, the student will be given an "I" for incomplete work.
  - If the grade is not reported in a timely manner, the student will be denied the opportunity to participate in the program.
4. An activity log verifying that you monitored the activity (due on specific dates). The log is to be maintained by the student. This is not designed to produce more work for you, the provider. It should reflect:
  - A log of training, practice, tournament play or activity participation for each week.
  - Time, location, and length of training
  - Absences
  - Signature of student and trainer or coach.

For further information please contact the student's school counselor or Off Campus Physical Activity Coordinator.



**§116.55. Individual Sports (One-Half Credit).**

(a) General requirements. The recommended prerequisite for this course is Foundations of Personal Fitness.

(b) Introduction.

(1) In Physical Education, students acquire movement knowledge and skills that provide the foundation for enjoyment, continued social development through physical activity, and access to a physically-active lifestyle. The student exhibits a physically-active lifestyle and understands the relationship between physical activity and health throughout the lifespan.

(2) Students in Individual Sports are expected to participate in a wide range of individual sports that can be pursued for a lifetime. The continued development of health-related fitness and the selection of individual sport activities that are enjoyable is a major objective of this course.

(c) Knowledge and skills.

(1) **Movement.** The student develops the ability to participate confidently in individual sports. The student is expected to:

(A) consistently perform skills and strategies and follow rules at a basic level of competency.

(2) **Movement.** The student applies movement concepts and principles to the learning and development of motor skills. The student is expected to:

(A) use internal and external information to modify movement during performance;

(B) describe appropriate practice procedures to improve skill and strategy in a sport;

(C) develop an appropriate conditioning program for the selected sport; and

(D) identify correctly the critical elements for successful performance of a sport skill.

(3) **Social development.** The student understands the basic components such as strategies, protocol, and rules of individual sports. The student is expected to:

(A) acknowledge good play from an opponent during competition;

(B) accept the roles and decisions of officials;

(C) demonstrate officiating techniques; and

(D) research and describe the historical development of an individual sport.

**TEKS for Physical Education: (FOR PROVIDER)**

- (4) **Physical activity and health.** The student exhibits a physically-active lifestyle that improves health and provides opportunities for enjoyment and challenge during individual sports. The student is expected to:
- (A) select and participate in individual sports that provide for enjoyment and challenge;
  - (B) analyze and evaluate personal fitness status in terms of cardiovascular endurance, muscular strength and endurance, flexibility, and body composition;
  - (C) analyze and compare health and fitness benefits derived from participating in selected individual sports;
  - (D) establish realistic yet challenging health-related fitness goals for selected individual sports;
  - (E) explain the interrelatedness between selected individual sports and a personal fitness program;
  - (F) describe two training principles appropriate for enhancing flexibility, muscular strength and endurance, and cardio respiratory endurance; and
  - (G) explain the effects of substance abuse on personal health and performance in physical activity such as side effects of steroid use.
- (5) **Physical activity and health.** The student understands and applies safety practices associated with individual sports. The student is expected to:
- (A) evaluate risks and safety factors that may affect individual sport preferences;
  - (B) identify and follow safety procedures when participating in individual sports; and
  - (C) describe equipment and practices that prevent or reduce injuries.
- (6) **Social development.** The student develops positive personal and social skills needed to work independently and with others in individual sports. The student is expected to:
- (A) evaluate personal skills and set realistic goals for improvement;
  - (B) respond to challenges, successes, and failures in physical activities in socially appropriate ways;
  - (C) accept successes and performance limitations of self and others;
  - (D) anticipate potentially dangerous consequences of participating in selected individual sports; and
  - (E) demonstrate responsible behavior in individual sports such as playing by the rules, accepting lack of skill in others.

*Source: The provisions of this §116.55 adopted to be effective September 1, 1998, 22 TexReg 7759.*

**§116.56. Team Sports (One-Half Credit).**

(a) General requirements. The recommended prerequisite for this course is Foundations of Personal Fitness.

(b) Introduction.

(1) In Physical Education, students acquire the knowledge and skills for movement that provide the foundation for enjoyment, continued social development through physical activity, and access to a physically-active lifestyle. The student exhibits a physically-active lifestyle and understands the relationship between physical activity and health throughout the lifespan.

(2) Students enrolled in Team Sports are expected to develop health-related fitness and an appreciation for team work and fair play. Like the other high school physical education courses, Team Sports is less concerned with the acquisition of physical fitness during the course than reinforcing the concept of incorporating physical activity into a lifestyle beyond high school.

(c) Knowledge and skills.

(1) **Movement skills.**

(A) demonstrate consistency using all the basic offensive skills of a sport while participating.

(B) demonstrate consistency using all the basic defensive skills of a sport while participating.

(2) **Movement skills.** The student applies movement concepts and principles to the learning and development of motor skills. The student is expected to:

(A) use internal and external information to modify movement during performance;

(B) describe appropriate practice procedures to improve skill and strategy in an activity;

(C) develop an appropriate conditioning program for the selected activity;

(D) identify correctly the critical elements for successful performance within the context of the activity; and

(E) recognize that improvement is possible with appropriate practice.

(3) **Social development.** The student understands the basic components such as strategies, protocol, and rules of structured physical activities. The student is expected to:

(A) acknowledge good play from an opponent during competition;

(B) accept the roles and decisions of officials;

(C) demonstrate officiating techniques; and

(D) research and describe the historical development of an individual sport.

**TEKS for Physical Education: (FOR PROVIDER)**

- (4) **Physical activity and health.** The student exhibits a physically-active lifestyle that improves health and provides opportunities for enjoyment and challenge through team sports. The student is expected to:
- (A) select and participate in individual sports that provide for enjoyment and challenge;
  - (B) analyze and evaluate personal fitness status in terms of cardiovascular endurance, muscular strength and endurance, flexibility, and body composition;
  - (C) describe the health and fitness benefits derived from participating in selected team sports;
  - (D) establish realistic yet challenging health-related fitness goals;
  - (E) develop and participate in a personal fitness program that has the potential to provide identified goals; and
  - (F) describe two training principles appropriate for enhancing flexibility, muscular strength and endurance, and cardio respiratory endurance.
- (5) **Physical activity and health.** The student knows the implications and benefits from being involved in daily physical activity. The student is expected to:
- (A) discuss training principles appropriate for enhancing flexibility, muscular strength and endurance, and cardio respiratory endurance;
  - (B) explain the effects of eating and exercise patterns on weight control, self-concept, and physical performance; and
  - (C) explain the effects of substance abuse on personal health and performance in physical activity.
- (6) **Physical activity and health.** The student understands and applies safety practices associated with team sports. The student is expected to:
- (A) evaluate risks and safety factors that may affect sport preferences;
  - (B) identify and apply rules and procedures that are designed for safe participation in team sports;
  - (C) identify team sports that achieve health-related fitness goals in both school and community settings; and
  - (D) participate regularly in team sports.
- (7) **Social development.** The student develops positive self-management and social skills needed to work independently and with others in team sports. The student is expected to:
- (A) evaluate personal skills and set realistic goals for improvement;
  - (B) respond to challenges, successes, and failures in physical activities in socially appropriate ways;
  - (C) accept successes and performance limitations of self and others and exhibit appropriate behavior/responses;
  - (D) anticipate potentially dangerous consequences of participating in selected team sports; and
  - (E) display appropriate etiquette while participating in a sport.

***PLEASE NOTE:***

***DURING THE SUMMER MONTHS***

***PLEASE MAIL OR DROP OFF ALL***

***APPLICATIONS TO:***

***CARROLL ISD  
ATTN: OCPA PROGRAM  
2400 N. Carroll Ave.  
Southlake, TX 76092***

***The Carroll Administration Center is open  
Monday – Thursday in the summer.  
THANK YOU.***