

HUTTO I.S.D. ADMINISTRATIVE REGULATION



PROCEDURES CODE:

CORRELATING POLICIES:

CONTACT: Asst. Supt. of Curriculum & Instruction

HUTTO INDEPENDENT SCHOOL DISTRICT *OFF-CAMPUS PHYSICAL EDUCATION PROCEDURES*

1. The student obtains an Off-Campus Physical Education packet from the school counselor.
2. The student and parent/guardian read the information in the packet and fill-out the appropriate portion of the applications form.
3. The student and private instructor fill-out and sign the appropriate portion of the application form.
4. The application form must be turned in to their respective counselor prior to the first week of the semester of enrollment.
5. After checking the application thoroughly, verifying all information, signatures will be required by both the counselor and school principal for approval.
6. The Assistant Superintendent of Curriculum & Instruction and/or designee is responsible for monitoring the private program to ensure compliance with TEA physical education requirements/regulations.
7. Grades will be assigned and attendance verified by the private program instructor. Progress and grade reporting will follow HISD timelines. (Grades will be reported as PASS/FAIL).
8. Any changes in the student's schedule must be immediately reported to the student's counselor and/or school principal.
9. Students requesting to participate in an off-campus physical education program cannot be scheduled for this activity during the district's official daily attendance snapshot.

**Adopted 6/2013 –
Updated 2/2020**

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COUNSELOR RESPONSIBILITIES:

1. Provide applications and explain the program, especially student responsibilities, to those students eligible for the programs.
2. Check each returned application to verify that it is correctly and completely filled out.
3. Once an application is completed, sign it, have the principal sign it, and send a copy to the Director of Student Services.
4. Inform students that they may not have late arrival or early dismissal for Category II permits.
5. Record grades and attendance for off-campus students at the end of every six weeks. These grades will be received from the instructor of the off-campus sponsoring agency

DESIGNEE RESPONSIBILITIES:

1. Provide appropriate application forms to school counselors.
2. Visit all new agencies and/or instructors as needed and verify agency credentials.
3. If the agency and instructor meet the requirements, ensure the instructor has signed an Instructor Agreement Form to keep on file.

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HUTTO INDEPENDENT SCHOOL DISTRICT OFF-CAMPUS PHYSICAL EDUCATION PROCEDURES

TO BE COMPLETED BY STUDENT: (This information pertains to the year of participation)

NAME: _____ SCHOOL: _____

SEX: M F PRESENT GRADE LEVEL: _____ COUNSELOR: _____

PARENT/GUARDIAN:(Print) _____ TELEPHONE: _____

STREET: _____ CITY: _____ ZIP: _____

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

NAME OF SPONSORING AGENCY: _____

STREET: _____ CITY: _____ ZIP: _____

INSTRUCTURE:(Print) _____ TELEPHONE: _____

NOTE: IN ORDER FOR THIS APPLICATION TO BE CONSIDERED FOR ANY SEMESTER, IT MUST BE RETURNED TO THE COOUNSELOR NO LATER THAN FIRST WEEK OF THE SEMESTER FOR WHICH THE APPLICATION IS BEING MADE.

1. I am applying for admission into the Off-Campus Physical Education for the 20__-20__
 Fall Semester Spring Semester Both Semesters
2. Category I (MS & HS). _____ Category II (HS Only). _____
3. If accepted into an Off-Campus Physical Education Program, I understand that no time from school will be missed other than the scheduled class time.
4. Students may not transfer from athletics or another physical education class into an Off-Campus Physical Education Program during the same semester.

TO BE COMPLETED BY SCHOOL OFFICALS

PRINCIPAL APPROVAL: _____ DATE: _____

COUNSLOR APPROVAL: _____ DATE: _____

EXTRA-CURR. COORD. APPROVAL: _____ DATE: _____

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TO BE COMPLETED BY THE PARENT AND STUDENT

I HAVE CAREFULLY READ THE GUIDELINES FOR THE Off-Campus Physical Education Program and I agree to comply with those regulations. I hereby release the **HUTTO INDEPENDENT SCHOOL DISTRICT, its employees, agents, and its Board of Trustees**, from all claims or liability in any way attributable to the program, including all travel to, from, and during the program.

I also understand that all liability in case of accident or hospitalization is the responsibility of the parent or the private/commercial agency. The **HUTTO ISD** is not responsible for accident or hospitalization insurance. I understand that Hutto ISD has no control over the daily activities of the program, quality of the program, or qualification of the instructor of the program.

My son/daughter _____ has permission to participate in the Off-Campus Physical Education Program in _____ at _____.
(activity) (agency)

Parent/Guardian Signature: _____ Date: _____

Student Signature: _____ Date: _____

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HUTTO INDEPENDENT SCHOOL DISTRICT ***OFF-CAMPUS PHYSICAL EDUCATION INSTRUCTOR AGREEMENT***

Facility/Agency

Instructor's Name

As a professional instructor, I am aware of the emphasis on program objectives and that grading is based on performance and attendance established by public education and the Hutto Independent School District. Therefore, I will support the following standards:

- As the instructor, I will adhere to the district's guidelines for attendance by the student.
- The student is expected to participate in the activity on a regularly scheduled basis.
- The instructor will keep an accurate record of student attendance and report attendance to the student's home campus every 6 weeks.
- The instructor will forward a grade recommendation based on student performance and attendance as requested to the campus principal/designee one week prior to the end of each reporting period. Grade will be PASS/FAIL)
- The instructor will submit a written outline of program objectives and activities to the Assistant Superintendent of Curriculum and Instruction with the student application.
- The instructor will contact the campus counselor if the student's attendance or performance becomes irregular and may impact the success of the student.
- The instructor will need to register as an unsupervised volunteer (not a mentor) with Hutto ISD to secure a background check. Proof of the approved background check must be attached to the application (an email will be sent to the applicant once the check is approved). Please complete the District Volunteer Application at the following website:
<https://apps.raptortech.com/Apply/MzUyODplbi1VUw==>

I understand that the Hutto Independent School District is accountable for the participation of each student in an Off-Campus Physical Education Program. I will make every effort to cooperate with the district in their accounting procedures.

As a participant in the District's off-campus physical education program you agree to indemnify and hold the Hutto Independent School District harmless from any and all claims that may be brought against the District, Board Members, employees, or agents thereof that are connected with the injury or death of the District student while on your premises or under your supervision.

INSTRUCTOR'S SIGNATURE: _____

DATE: _____

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TENTATIVE SCHEDULE (TO BE COMPLETED BY AGENCY INSTRUCTOR)

The student must participate in his/her activity under professional supervision for a minimum of five/fifteen hours each week at one approved agency. The required five/fifteen hours each week must be spread over at least three days and include at least ninety minutes of instruction by approved instructor.

Indicate the beginning time, ending time, and the nature of activity. It is imperative that this schedule be kept current at all times.

In case of a change in schedule, please notify the _____ at _____.

	BEGINNING TIME	ENDING TIME	ACTIVITY	HOURS
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

INSTRUCTOR'S SIGNATURE: _____

DATE: _____

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GENERAL REQUIREMENTS FOR APPROVAL OF OFF-CAMPUS PHYSICAL EDUCATION

The following is a list of basic requirements that have been established by Hutto ISD and the Texas Education Agency. These requirements must be met and maintained for the student to be eligible for participation in the program.

1. The purpose of the program is to accommodate students who are making a serious effort to develop high level capabilities, allowing them to be involved in an off-campus program that provides training exceeding that offered by the school district.
2. Of-campus physical activity programs will be approved only for those students who have been strongly recommended by qualified instructors.
3. Only those students in grades six (6) through twelve (12) are eligible for consideration for off-campus programs. **No** students in grades K through five (5) will be considered for an off-campus program.
4. Students involved in any type of activity that meets the TEA Commissioner's Criteria will be considered for the off-campus program.
5. Students applying for Off-Campus Physical Education will be considered under two (2) categories:

CATEGORY I: *These programs typically involve 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. Students participating at this level may receive a maximum of one-half credits per semester. A total of one and one half credits may be earned toward state high school graduation requirements. The Olympic-caliber program may be substituted for classes offered at the school. (available to Middle & High School students)*

CATEGORY II: *These programs typically involve a maximum of five (5) hours per week in a high quality, well supervised program by appropriately trained instructors and are for a minimum of three (3) days per week. Students certified to participate at this level **MAY NOT** be dismissed from any part of the regular school day. Students participating at this level may receive a maximum of one-half credit per semester. A total of one and one half credits may be earned toward state high school graduation requirements. All participation must always be under direct supervision of the instructor. Students may not receive a Category II waiver for any class (such as dance) that is offered at the school. (available to High School students only)*

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6. Students who are participating in the program for physical education credit may not be enrolled in another physical education class or athletics during this time.
7. The student may not have more than five (5) unexcused absences per semester at the off-campus facility. Excessive school homework is not an excused absence from the required activity.
8. At the beginning of each new school year the Hutto Independent School District Asst. Superintendent of Curriculum and Instruction or his designee and the private facility administrator or instructor will meet for the purpose of establishing a full understanding of all conditions involved. This meeting will take place prior to any decision for program accreditation.
9. The facility will be required to document and certify all efforts to comply with the Texas School Essential Elements as they apply to the specific activity being taught.
10. The instructor will be required to report a final grade and attendance at the conclusion of each six (6) week grading period based on student performance and attendance as requested. The report will be sent to the campus principal/designee one week prior to the end of each reporting period. (Grade will be PASS/FAIL)
11. The private instructor must constantly observe and evaluate the student's attitude, work habits, and progress. If at any time the student fails to maintain a high level of performance, the instructor will be expected to contact the school counselor and withdraw the recommendation for the student's participation. The student will no longer be considered eligible for the off-campus program.