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| **Course: Physical Education**  **Teacher: Mr. Jones**  [**ralphc.jones@cms.k12.nc.us**](mailto:ralphc.jones@cms.k12.nc.us)  **980-344-3410** |  |  |

**Course Description & Outline:**

In alignment with the district our vision is to offer quality physical education, health and physical activity programs to motivate students to pursue lifetime personal wellness. Our goal is to have 100% of our students complete middle school emotionally, socially and physically healthy.

This year we will be implementing the sport education model of instruction in all ofr our physical education classes. The goal of this model is to educate students to be players in the fullest sense and to help them develop as competent, literate, and enthusiastic sports persons. We will do this through a combination of team games, and fitness units, my class units are as follows.

**Mandatory Supplies:**

Ridge Road PE uniform- Purchased by labor day (September 5)

**Lock for PE lockers-** Students need to bring in their own lock for PE to lock up valuables. We will not be responsible for lost or stolen valuables not locked in lockers.

**Athletic shoes only!:** no open toed shoes, slides, or hard soled dress shoes or boots are allowed on gym floor.

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| **Grading Scale**:  93-100          A  85-92            B  77-84            C  70-76            D  Below 70       F |

**Grading System:**

**Cognitive Skills**

Students will be assessed on their knowledge of the tactics, rules, and history of different sports through a combination of written and authentic assessments

**Social Affective Skills**

Students will be assessed on their ability to lead, work in small and large team settings, problem solve, collaborate, and resolve conflict. Students will be assessed daily through a checklist and point system that will encourage them to grow as successful sports people.

**Kinesthetic Skills**

Students will be assessed on their improvement in fundamental motor skills and functional strength and mobility over the duration of the quarter.

**HOMEWORK-**There may be a weekly homework assignment pertaining to the weeks lesson, but I will try to limit the amount of homework students receive. Turn-in policy is the same as health.

**WE WILL ALSO HAVE A TEST AT THE END OF EACH UNIT.** This will be an authentic assessment that will take place as a culminating activity such as a game or tournament. Students should be able to demonstrate proficiency of game rules, game play, and sportsmanship during game play.

**Expectations / Consequences / Discipline**- Students must adhere to the RRMS Student Code of Conduct, as well as specific class rules:

1. Students will have 5 minutes at the beginning and end of class to change and use the restroom. At the end of 5 minutes after start of class the Locker rooms will be locked until the end of class. No restroom use during class unless an emergency or otherwise notified by parent or doctor.
2. Students will begin an instant activity upon exiting the locker room. The warm-up activities will vary by unit.
3. Students are not allowed to leave the gymnasium for any reason. If outside students must stay with their class at all times unless called to the office by security or front office staff.
4. Students should bring a water bottle to class on days when they are outside. Water will be allowed during class on an as needed basis. Note: when there are lessons at the track or football field there are no water fountains so water bottles are highly recommended!!!
5. No food, gum or drinks other than water are allowed in the gym.
6. Students need to bring a change of clothes each class in order to earn full dress out credit for the day.
7. Students are expected to maintain a safe learning environment and to respect themselves and others and show it at all time.
8. Students who are injured must have an official note from the doctor to be excused from physical activity. Injured students will complete a one page report on the topic that is being covered in class.

\*Student behavior will be tracked in a behavior (flight) log & referred back to as necessary throughout the quarter.

**Please sign and return bottom portion: KEEP TOP PORTION FOR PERSONAL RECORDS!**

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Please indicate whether your child has any medical conditions or limitations that we should be aware of during class. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Student Name (Printed legibly)

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Student Signature

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Parent/Guardian Signature

Day Time Phone # (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cellular Phone # (\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_