LIFETIME WELLNESS

**Instructor:   Coach M. A. Davis**

**Instructor Email: davism19@ccschools.k12tn.net**

**Classroom:   Gym/PE 101**

**Textbooks:**

Glencoe Health – 2007, ISBN-10: 0078758769 ISBN-13: 978-0078758768

The Young Travelers Gift – Andy Andrews, ISBN-10: 140030427X ISBN-13: 978-1400304271

**Materials Needed:**  Composition Book, Pen/Pencil, Dress Out Clothes/Shoes

**Class Rules:**

* Do not leave class area without permission – this includes restroom and dressing rooms
* No one is permitted outside gym door until dismissed by teacher
* Do not linger in dressing rooms – marked tardy for not being in roll call line
* Bring all needed materials to class
* Throw all trash in garbage cans
* Complete all assignments and follow all directions when given
* No Food or Drink allowed in Gym / Classroom is fine until privilege is lost

**Dress Code and Regulations**

* Students are required to dress out everyday – see dress requirements below
* Each student will be assigned a locker.  Make sure all valuables are secure.  **A lock is REQUIRED**.  **The instructor is not responsible for students’ valuables.**
* Any clothing or other materials left in gym or in/on dressing room floor will be thrown away at the end of the day.
* Students are expected to go directly to dressing rooms, taking all belongings with them.
* Students will be given 8 minutes to dress out and 10 minutes to dress in.
* Dressing rooms are subject to search and inspection by the teacher at any time.
* Students will be expected to use all equipment appropriately
* **$5.00 P.E. Fee for classroom supplies**

**Dress Requirements**

**PE Uniforms will be made available for $15.00 (shorts and shirt set)**

* Tennis Shoes – no exceptions – street shoes are not permitted on gym floor
* Socks
* T-shirt
* Shorts, sweatpants or warm-up pants – any color

Students that do not meet with the dress requirements will comply with the following consequences:

1. Two days – two days only – throughout the semester are allowed each student without penalty affecting participation/dress out grade.
2. After two days, any student that fails to meet the dress code requirement in any area will be written up with an office referral for dress code violations and will receive no points for participation/dress out grade.

**Grading Scale**

93-100 = A Daily Grades = 10% (Class Notes & Homework)

85-92 = B Chapter Tests/Class Projects = 30%

75-84 = C Dress Out/Participation = 40%

70-74 = D Mid Term/Final Exam = 20%

69 & below = F

**All students will be required to keep a class notebook.**  This notebook will contain all class notes and daily assignments throughout the semester.  Assignments must be in the notebook to be graded.

**Attendance/Makeup Policy:**

Students will be given ample time to make up any work missed for excused absences.  Assignments or tests missed due to an unexcused absence will result in a grade of zero.

\*Please note that assignments from previous grading periods cannot be made up after the grading period has expired.

**Major Class Assignments:**

* Weekly Pacer Fitness Tests
* Nutrition and Diet Analysis Project
* First Aid Kit Creation Project

**Projected Pacing Guide**

1st 9 weeks 2nd 9 weeks

Mental/Emotional/Social Health Safety and First Aid

Personal Fitness Substance Use and Abuse

Nutrition Disease Prevention

\*\* A large portion of the sexuality and family life standard will be covered by the Life on Point program.

**State Standards**

The lifetime wellness standards that will be covered in this class can be found at the following web address:

https://www.tn.gov/assets/entities/education/attachments/std\_pe\_lifetime-wellness.pdf

\*\*\*Any student who has a medical problem which requires a modification must furnish a statement from a physician who indicates appropriate and specific activities and dates of modification.  If temporary illness occurs, student will dress for class and participate in modified activity or do a written assignment.

We, the parent/guardian, of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ will be liable for any injury that occurs in Physical Education class and will not hold Cumberland County High School liable for any injury or accident.

**WE HAVE READ AND UNDERSTAND THE PHYSICAL EDUCATION CLASS POLICIES**

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

Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone # : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact # : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Health Problems that my teacher should be aware of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Students Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_