



OFF-CAMPUS PHYSICAL EDUCATION INFORMATION PACKET

- Information for Parents
- Parent Permission Form
- Waiver Application
- Submission Due To Physical Education
Coordinator (Helen Wagner)

Deadline to submit ALL paperwork is June 1, 2018
Email submission of forms is preferred

HISD Physical Education Department
Athletic Department/**Attention Helen Wagner**
20200 Eastway Village Drive
Humble, TX 77338
Email: helen.wagner@humbleisd.net

**Please remember students must reapply for an off
campus physical education waiver each school year to be
considered for the program.**

HUMBLE INDEPENDENT SCHOOL DISTRICT
OFF-CAMPUS Physical Education (OCPE)
INFORMATION FOR PARENTS

To maintain compliance with the Texas Education Code, Humble ISD offers students a waiver process for OCPE programs. This waiver process consists of Category 1 (15 hours) and Category 2 (five hours) for high school and middle school.

Request for waivers for approval of private or commercially sponsored physical activity programs will be considered in two categories. These are:

CATEGORY 1 -OLYMPIC TRAINING: is available to Middle School and High School students.

(Waiver requests considered under this category must be approved by the local Board and submitted to the Texas Education Agency for final approval.)

- Private or commercially sponsored physical activity programs that lead to **Olympic-level** participation and/or competition. These programs typically involve a **minimum of 15 hours** per week of highly intense, professionally supervised training. The training facility, instructors, and the activities involved in the program must be certified by the Superintendent or his/her designee to be of exceptional quality.
- Students qualifying and participating at this level may be dismissed from school one period per day for such participation. Students dismissed must not be permitted to miss any academic class to fill out a regular day in lieu of leaving campus for OCPE.
- **The OCPE students should leave the campus one period prior to the end of the day or not check in to school until the second period of the day. There will be no supervised areas for these students to stay on campus for the unassigned class period and will result in immediate dismissal of the OCPE Program.** Students who discontinue OCPE Category 1 during a semester will be enrolled in a regular physical education class for the remainder of the semester to complete the credit in physical education for that semester.
- It is anticipated that only a very limited number of students will qualify for this exceptional level of participation.
- The credits being earned for graduation requirements are to be taken during the students' high school enrollment period.
- Students participating at this level may receive a maximum of **one-half** credit per semester. A total of **one credit** may be earned toward state high school graduation requirements or **four semesters** for middle school PE requirements.

CATEGORY 2: is available to Middle School and High School students.

(Waivers in Category 2 must be approved by the local Board but do not require submission of approval of the Texas Education Agency.)

- Private or commercially sponsored physical activity programs as certified by the Superintendent or his/her designee to be of high quality, well supervised by appropriately trained instructors, and consisting of a **minimum of five hours** per school week.
- Students participating at this level may receive a **maximum on one-half** credit per semester. A total of **one credit** maybe earned toward state high school graduation requirements or **four semesters** for middle school PE requirements.
- Students certified to participate at this level **may not** be dismissed from any part of the regular school day.
- The credits being earned for graduation requirements are to be taken during the students' high school enrollment period.

Off Campus PE WAIVER APPLICATION
Humble Independent School District
2018-2019

Student's Name _____ **ID#** _____
(Print)

Current Grade Level _____ **Current Campus** _____

Proposed Grade Level _____ **Proposed Campus** _____

This application is for **Fall Semester** _____ **Spring Semester** _____ **Both** _____

Category I (15+hrs) Physical Activity Program, i.e.: Swimming, Dance, etc. _____

Category II (5+hrs) Physical Activity Program, i.e.: Swimming, Dance, etc. _____

His/Her workout schedule will be: (90% of training time must be Monday-Friday)

Monday	Workout begins	_____ a.m. or p.m.	Workout ends at	_____ a.m. or p.m.
Tuesday		_____ a.m. or p.m.		_____ a.m. or p.m.
Wednesday		_____ a.m. or p.m.		_____ a.m. or p.m.
Thursday		_____ a.m. or p.m.		_____ a.m. or p.m.
Friday		_____ a.m. or p.m.		_____ a.m. or p.m.
Saturday		_____ a.m. or p.m.		_____ a.m. or p.m.

TOTAL NUMBER OF WEEKLY HOURS _____

Name of Commercial Establishment _____

Phone Number _____

TO THE INSTRUCTOR FOR CATEGORY II APPLICATS:

As this student's instructor, I verify this time schedule to be correct. I understand that it is the responsibility of this commercial establishment to maintain the physical education programs in the described categories. I am to inform the Coordinator of PE/Health of any program changes or student's involvement or lack thereof.

Instructor's Signature

Date

NAME OF STUDENT'S COUNSELOR _____

_____ Waiver Approved	_____ Waiver Denied
_____ Helen Wagner, Coordinator PE/Health	_____ Date

**Off Campus Physical Education
PARENT PERMISSION FORM
For Waiver Request
School Year 20_____ -20_____**

Student Name (please print) _____

Current Campus _____

Current Grade _____

I request permission from the Humble Independent School District for my child to receive physical education credit for active participation in the OCPE program.

I understand that the commercial facility named herein will satisfy the Texas Education Agency requirement for physical education instruction.

My child's middle school requirements may be satisfied through participation in an approved off-campus program. The grade earned by the middle school student will be pass/fail. High school credit will be earned with a numeric grade.

I have been informed that if, for **any reason**, my child does not complete the entire semester/trimester, he/she **will not receive any partial credit**. Credit may only be earned through one vendor.

Furthermore, I acknowledge that the Humble Independent School District will not provide transportation to or from the establishment, does not endorse any commercial training program, and the approval of this application does not constitute any assurance as to the qualifications of the instructors or to the quality and/or safety of the equipment and facilities.

The undersigned is the parent or legal guardian of the named student. He/she is a student in the Humble Independent School District and I do hereby consent to said student participation in the commercial training program. I further agree to hold the Humble Independent School District, its Board of Trustees, administration, and/or faculty **harmless from all liability for any injuries** which said student may receive while participation in this program or while traveling to and from such program.

I also understand that if my child is approved for Category I **They must leave the campus one period prior to the end of the day or not check in to school until the second period of the day. There will be no supervised areas for these students to stay on campus for the unassigned class period thus resulting in immediate dismissal of the OCPE Program. My child will also be responsible for completing the annual fitness assessment that may require him/her to attend before, during, or after school testing sessions.**

I hereby acknowledge my understanding of this document with my signature below.

Parent Signature

Parent's Printed Name

Address _____

Home phone _____ Date _____

The Commercial Establishment we have chosen: _____

Address: _____ Phone _____

Instructor's Name _____ He/She is aware of this request.

SEMESTER REPORT

IT IS THE RESPONSIBILITY OF THE INSTRUCTOR/VENDOR TO SEE THAT THIS "Semester Report" is returned to the student's grade level counselor/registrar prior to the end of the semester.

**This is only an example of the form the instructor/vendor will receive with their application packet.
NO STUDENT IS TO RETURN ANY SEMESTER REPORT TO THEIR COUNSELOR/REGISTRAR.**

Student's Name _____

Commercial Establishment _____

Instructor's Name _____ Phone _____

Student's home campus _____ Student's Grade Level _____

Number of absences _____ Conduct _____

Grade (Middle School): Pass Fail (Circle One)

Numeric Grade (High School) _____

Instructor's Signature **Date**

Comments: _____
