**PHYSICAL EDUCATION 7/8/9/10**

Mr. Steciuk

**What We’re All About**

The aim of this course is to provide a high quality Physical Education program that will give you the skills necessary to **get active and stay active**. During this course you will learn basic movement skills, game tactics and effective active living strategies. Our goal is to not only improve your athletic performance but to give you the necessary tools to pursue a healthy, active lifestyle.

As well, students will have a 2-3 week classroom unit titled "PE Passion Project" that could include topics looking like:

1. Investigate and analyze influences on eating habits and right food choices.
2. Mental Health of teens (stress, anxiety, and depression).
3. First Aid and following safety guidelines
4. Social Media Bullying, Stereotypes or discrimination
5. Strategies to pursue personal healthy-living choices

**We Expect You To**

* + Arrive on time wearing an appropriate gym strip (will be discussed in class)
  + Participate to the best of your ability
  + Have a positive attitude; respect your peers and teachers
  + Assist in equipment set up and take down throughout the class
  + Participate in a safe manner and abide by gym rules
  + Leave any electronic gadgets in your locker
  + Have fun!

**The Fun Stuff!**

You will have the opportunity to participate in a variety of activities throughout this course. The following are examples of some activities we may experience.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Individual & Dual Activities** | | **Games** | | **Rhythmic Movement** |
| **Fitness**   * swimming * curling * hiking * yoga | **Games**   * disc golf * track & field * racquet sports * rope jumping | Basketball  Floor Hockey  Volleyball  Team Handball  Field Hockey | Ultimate  Softball  Rugby  Lacrosse  Soccer | Dance  Line, salsa, swing, hip hop, etc. |

*Note:* We won’t be able to participate in every activity listed above and may include activities that are not listed. There may be an opportunity for field trips but those will be discussed in class.

**How will you be graded?**

|  |  |  |
| --- | --- | --- |
| **60% Attitude & Participation** | **25% Skill & Performance** | **15% Knowledge** |
| **Daily Participation Marks**  See attached marking scale | This will be evaluated in a variety of ways. Some possibilities include: routine building, observing your game play, formal skill testing. | **Written Tests**  For rule-based sports & active health & fitness theory units |

**\*\* This is an approximate weighting and may change \*\***

**Contact Info**

Email: rob.steciuk@sd23.bc.ca

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**Participation & Attitude**

**10 Point Scale**

|  |  |
| --- | --- |
| 9/10  (90% +) | * I arrived **early or on time** with proper PE strip * I put in **maximum effort** during all activities * I was **always** supportive and encouraging of my classmates * I **always** treated my teacher and classmates with respect * I helped set up and put away equipment |
| 8  (80% +) | * I arrived **on time** with proper PE strip * I put forth an **above average effort** during activities * I was **almost always** supportive and encouraging of my classmates * I treated my teacher and classmates with respect * I helped set up and put away equipment |
| 6  (60% +) | * I arrived **on time** with proper PE strip * I put forth an **average effort** during activities * I was **usually** supportive and encouraging of my classmates * I treated my teacher and classmates with respect |
| 5  (50% +) | * I arrived **late** **or** **without** proper PE strip * I put forth a **below average effort** during activities * I was **rarely** **supportive** and encouraging of my classmates * I was **sometimes disrespectful** to my teacher and classmates |
| 1-4 | * I arrived **late and without** proper PE strip * I put forth **little or no effort** during activities **not supportive** and encouraging of my classmates * I was **disrespectful** to my teacher and classmates |

Field Trip Permission Form

Dear Parent / Guardian,

The purpose of this letter is to make you aware of the various activities your child will be participating in during Physical Education this semester.

We may be using walking, hiking and jogging off school grounds as part of our fitness program. Fieldtrips may include walking to Capital News Center (CNC) to access the indoor soccer fields, gyro beach for beach volleyball, as well as McCurdy Bowling Centre. An OPTIONAL fee of $20.00 for these course enhancing opportunities will be added to their online fees. Students will be able to meet course requirements without attending the field trips. If students decide to attend, the fee can be paid online through our school website.

Please include your printed name and signature on the bottom of the form on the opposite side of this letter. If you have any questions or concerns do not hesitate to contact your student’s teacher at the school at (250) 870- 5108 or by email.

Sincerely,

OKM P.E. Department

Mr. Steciuk

**Field Trip Permission Form**

**OKM Leadership**

**Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **School:** OKM Secondary | **School Phone:** 870-5108 | | **Teacher Contact**: |
| **Destination of Trip:** Various locations around Kelowna  ie. Capital News Center, streets around OKM, McCurdy Bowl, Gyro Beach, etc. | | | |
| **Description of Activities:** Travel via foot and district bus to various recreational facilities around Kelowna; hiking and jogging fieldtrips on streets and paths around Kelowna. | | | |
| **Inherent Risks of Participation:**  Injuries related to vehicle collisions while traveling to and from activity areas; becoming lost or separated from the class; injuries related to trips and falls; injuries related to bicycle crashes; injuries related to the demands of activity, injuries related to equipment malfunction; allergic reactions; injuries related to falling on ice; other risks associated with participation in the activity and environment | | | |
| **Group of Students:** OKM Physical Education Students | | | |
| **Number of students:** 30-34 | | **Number of Teacher Supervisors:** 1 | |
| **Departure Date:** Various Dates | | **Departure Time:** Various Blocks | |
| **Return Date:** Various Dates | | **Return Time:** Various Blocks | |
| **Transportation:**  School District Bus [ X ] Wheelchair Access [ ] Private Vehicle [ ]  Rented Vehicle [ ] Commercial Carrier [ ] Foot / Bicycle [ X ]  **Driven By:**  District Driver [ X ] Authorized Adult [ X ] Commercial Driver [ ]  Authorized Student Driver (No Passengers Allowed) [ ] Teacher [ x ] | | | |

**Parent/Guardian Consent**

I have read the description of activities, understand that there may be inherent risks associated with these activities and accept these risks. I also understand that all of the requirements of the school Code of Conduct apply while students are on field trips and I will repay the school for costs if it is necessary to send this student home by means other than as stated above.

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

Student’s BC Medical Number: \_\_\_\_\_On File\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medical concerns, allergies, medication requirements: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_