**LIFETIME WELLNESS SYLLABUS**

**Coach Collin McPherson**

Book: *Health* by Glencoe

**Teacher**

Coach McPherson Classroom : East Hall Rm E2

1 Semester- **Wear Dress Code Everyday**

**Course Description**

The content of the course includes seven standards:

1: Nutrition

2. Mental, emotional, and social health.

3:Personal fitness.

4:Safety and FirstAid.

5:Substance Use and Abuse.

6: Human Growth and Development/Sexuality

Each content area is addressed in a classroom and/or physical activity setting. Personal fitness and nutrition is emphasized and integrated throughout the course. Students are provided opportunities to explore how content areas are interrelated. Students acquire knowledge and skills necessary to make informed decisions regarding their health and well being throughout their lifetime.

*For the classroom – grades are based on all assessments to include tests , quizzes, class work, projects.) etc. All grades carry the same weight.*

*Supplies you need to bring:*

1. Notebook paper

2. Pencil

3. Textbook (Classroom Set)

Procedures:

Great Starts

Follow Class Rules

Phone Policy

Class Starts everyday when the tardy bell rings- so be in your seat and working on “great start”.

**Physical Education**

**Coach Collin McPherson**

**Location: CCHS Gym 1 Semester**

**Course Requirement and grading scale**

*For the gym – pts deducted per day based on dress and participation rubric*

1. PE uniform
2. Socks
3. Athletic Shoes

**ACTIVITY COMPONENT FOR GYMNASIUM**

1. Students will dress out every day unless told otherwise by the teacher.
2. In case of serious or extended illness or injury (more than 1 week) a doctor's note is required with instructions regarding appropriate activity or inactivity.
3. Students have 5 minutes after the tardy bell to dress and stand on assigned space for attendance.
4. No equipment is to be picked up or activity begun until after attendance.
5. During class, students may not go into the dressing room without permission.
6. Grades are based on participation, effort, and attitude.
7. Dressing out everyday and enthusiastically participating in every activity is a positive approach to the grading process. Gym grades are based solely on dressing out and EFFORT!
8. Do NOT leave ANY valuables in the locker room!!!! All valuables need to be locked up in a locker by the student at the beginning of class.

Student/Teacher Contract

**CLASS RULES**

Come prepared for class (books, etc/clothes)

Participate in classroom/gym activities

Show respect for fellow classmates and teacher – per handbook

**CONSEQUENCES**

Should you decide to break any of these rules the following consequences will result:

1. First Offense – warning

1. Second Offense – 2nd warning/parent contact
2. Third Offense --disciplinary referral to office

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As a student in Wellness class, I have read the guidelines above and agree to follow them to the best of my ability. I take full responsibility for any consequences of my behavior.

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### WELLNESS HEALTH FORM

STUDENT NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TEACHER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate by checking if your child has any of the following conditions:

\_\_\_\_\_Heart Problems \_\_\_\_\_Vision Problems \_\_\_\_\_Asthma

\_\_\_\_\_Bone Disorders \_\_\_\_\_Blood Disorders \_\_\_\_\_Muscle Disorders

\_\_\_\_\_Seizure Disorders \_\_\_\_\_ADD/ADHD \_\_\_\_\_Allergies

If allergies, explain what kinds\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Medication on a regular basis\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Other (explain)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Please check the appropriate line

\_\_\_\_\_My child will be able to participate in the regular physical education component of the Wellness

Curriculum without restrictions.

\_\_\_\_\_ My child will be able to participate in the regular physical education component of the Wellness

Curriculum with the following restrictions:

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If you have any questions, please feel free to write a note, email me: collin.mcpherson@chestercountyschools.org., or call the school 989-8125 during 6th period (2:05-3:00pm).

A doctor’s note is required for an extended illness or injury (more than 1 week).

**Wellness is a graduation requirement.**

Parents Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_

Parents E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_