Welcome to Lakeview Leadership Academy PE! Please read the following policies of the department, sign the last page, and return it to your Physical Education teacher.

**DRESS CODE**

✓ All students are to be dressed out in the required PE uniform **everyday**. This includes:
  - Lakeview Spartans PE shirt grey
  - Lakeview Spartans PE shorts royal blue
  - Plain Light Gray sweats and /or sweatshirts

✓ PE shirts ($10) and shorts ($15) can be purchased in the ASB office during both lunches throughout the year.

✓ Or you can purchase the PE uniform online @ [www.lmsasbstore.com](http://www.lmsasbstore.com) print your receipt and bring it to Ms. Genie Cook in the counseling office.

✓ Default Login:
  - Username = student ID#
  - Password = first initial and last name
  - (no spaces and all lower case letters) Ex: Josh Smith = jsmith

✓ No school clothing is permitted **under** the P.E. uniform including tank tops, undershirts, and shorts.

✓ Student's last name and first initial (ie. Diaz, B.) **must** be on the uniform top and shorts for security and loss prevention.

✓ For safety purposes, athletic shoes and socks are required at the instructor's discretion. Hard rubber or elevated soled shoes, open backed/open toed shoes are not allowed.

✓ No cut offs or cut up uniforms will be allowed. If the uniform is lost, stolen or damaged it is the parents/guardians responsibility to replace the uniform.

✓ IPODS, cell phones, c.d. players, etc are not part of the PE uniforms and may NOT be brought out to PE. These items will confiscated and turned into the discipline office.

**MEDICAL EXCUSES**

✓ Parent and Doctor's notes excuse students from activity only. Students are still required to dress out unless physically unable to change (example: cast on leg, back brace...)

✓ Parent Notes for restricted activity are limited to three notes per semester. Each note will be limited to three consecutive days. If more time off from activity is needed a doctor's note with an explanation by the doctor detailing limitations is required.
ABSENCE/TARDY POLICY

Because this is a participation class, all absences must be made up in order to earn the daily points that were missed. Students are responsible for getting the make-up assignment from their PE teacher. All students must be inside the locker room before the tardy bell rings.

LOCKS/LOCKERS

Every student will be issued their own lock and locker in Physical Education. The student is responsible for replacement of lost or damaged locks ($10) and the cost of repairing a damaged locker. Lockers are to be used for PE items only. Personal locks will not be allowed and may be cut off. Large lockers are for your use during your PE period only for larger items such as backpacks. Combinations will only be given to the student who is assigned to that lock/locker and only with an ID card. The P.E. Department is not responsible for lost or stolen locks, P.E. clothes or other personal items, including cell phones.

GRADING POLICY

Academic grades are based on the following three areas:

Classwork / Daily Points .... 55%
Students will receive ten points per day for suiting up, participation, and cooperation.

Classwork / Running .... 30%
Weekly Cardio Days
Weekly Timed Mile Run

Assessments .... 15%
California Physical Fitness Testing
Skills Tests
Written Assignments / Homework
Written Tests / Quizzes

CONTACT US

If you have any questions or concerns throughout the year, please contact your student’s teacher at (760) 955-3400 at the following extensions:

David Brannon        x 46601
Brian Scarpce        x 46602
Danny Garcia         x 46755
Cindy Day            x 46603

Thank you,
Lakeview Physical Education Department
Please Complete and Return To Your Physical Education Instructor

Student’s Name (print): ________________________________

Parent/Guardian’s Names (print): ________________________________

Mailing Address: ____________________________________________

__________________________________________________________

Home Telephone: __________ Email: ______________________________

Work Telephone: __________ Cell Phone: ____________________________

I have read and reviewed the policies with in the Physical Education Handbook with my son/daughter.

__________________________________________________________

Parent/Guardian Signature Date

I have read and understand the policies contained in the Physical Education Handbook. I will try to do my best in physical education class during the 2016 – 2017 school year.

__________________________________________________________

Student Signature Date

Notification of Medical Conditions

Please use this form to notify the Physical Education Department of any chronic medical problems your son/daughter may have at this time. These should include all conditions requiring medication or limited activity. Any other condition will need to have a doctor’s verification.

Conditions (Please write “NONE” if there are no known conditions):

________________________________________________________________

________________________________________________________________

Restrictions (Please write “NONE” if there are no known conditions):

________________________________________________________________

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