

Leander ISD Off-Campus Physical Education - Student Application

Please review the Leander ISD OCPE Program Guidelines before completing.

Student Information (to be completed by parent/guardian):

Student Name _____ Date _____

Student ID # _____ School Year _____ Grade Level Requesting _____

Campus _____ Campus Counselor _____

Parent Phone Number _____ Parent Name _____

OCPE Program Selection (must provide appropriate documentation with application):

- Category 1 OCPE – 15 hours or more per week (NOT including competitions) of Olympic or National Level participation for the entire school year. Students qualifying and participating at this level may be dismissed from school one period per day.
 - A recent copy of the student’s entry form for Olympic or National Level participation/competition.
 - A publication which verifies the student’s Olympic or National Level status or rank.
 - A copy of the student’s Olympic or National Level certification, which verifies their status or rank.
- Category 2 OCPE – A minimum of 5 hours per week (NOT including competitions) for the entire school year. Must remain on campus and choose an elective to replace PE.
 - A copy of the student’s enrollment or participation verification from the agency listed below.

OCPE Activity Details (to be completed with the help of Agency Instructor):

Activity: _____

Agency Name: _____ Agency Website: _____

Instructor’s Name: _____ Instructor Email: _____

Student’s Weekly Schedule (activities at home/not at agency listed above do not count. Competitions do not count):

Day of the Week	Time (be very specific)	Agency Name	Describe Activity	Exact number of hours of participation (NOT a range)
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				

****Information listed here is what will be used when performing agency/site visits, ensure it is accurate****

Total Hours per week: _____

Signatures and Acknowledgements

Parent/Guardian - please initial and sign where appropriate

_____ The deadline for current Leander ISD students to apply for Off Campus PE is May 31st by 4:00pm in the Campus Counselor’s office. Failure to have a completed application submitted on time will result in denial of the waiver request and the student will be placed in a PE class until the next application period is open. Applications will not be approved until the agency and instructor have fulfilled all requirements. {Category 1 & 2}

_____ Category 1 OCPE requires that students leave campus during their off period. Students are not permitted to remain on campus in the library, teacher’s classroom, or any other area of the building. {Category 1 only}

_____ Students cannot remain on campus for pep rallies or assemblies that occur during or after 8th period. The only exception to that is if a student is participating in a spelling or geography bee on campus and must participate in one of those academic competitions. {Category 1 only}

_____ On early release days 8th period may not occur at the end of the day. Therefore, students will remain on campus in a study hall for 8th period and will be released according to the standard half-day schedule. {Category 1 only}

_____ Per the LISD Athletic Handbook, students cannot participate in both OCPE and an LISD Athletic Program. {Category 1 & 2}

_____ It is expected that students honor their commitment to OCPE for the full school year. If a student is unable to do so and requires a schedule change, they will be placed in PE for the remainder of the school year. {Category 1 & 2}

_____ A grade sheet will need to be submitted each six weeks to the campus registrar’s office. A student who satisfies the OCPE requirements as indicated on this sheet will receive a “pass”. Those who do not will receive a “fail”. No GPA points are awarded for OCPE. {Category 1 & 2}

I understand that the Leander Independent School District is accountable for the participation of each student in Off Campus PE. Failure to comply with all OCPE guidelines will result in removal from the program and placed into a district PE class.

Parent/Guardian Name: _____ **Signature:** _____ **Date:** _____

Instructor - please initial and sign where appropriate

_____ The instructor listed on this application must submit to or provide a background check each school year. Student OCPE applications will not be approved until the instructor has completed the background check.

_____ It is expected that should the Leander ISD student no longer participate in the agency program, the instructor will notify Leander ISD immediately.

_____ Pass/Fail grade sheets will be turned in by the deadline to ensure credit can be awarded. Failure to comply will result in the agency being removed from the approved agency list.

I have read and understand the OCPE Agency/Instructor’s responsibilities as part of the LISD OCPE Program. I understand that the agency will be dismissed from the OCPE program should they be in compliance. I certify that the information reported is correct and accurate.

Instructor Name: _____ **Signature:** _____ **Date:** _____

****Completed applications can be turned into the Campus Counselor or the Leander ISD Athletic Office Kimberly.Davies@leanderisd.org****

For Leander ISD Use Only: Approved Agency _____ Background Check _____ Date Approved: _____