# CARTERSVILLE HIGH SCHOOL PERSONAL FITNESS SYLLABUS

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Personal Fitness is a <u>required</u> course for graduation. It introduces the five health related components of fitness. Students will learn to recognize, evaluate, and develop these components. They include flexibility, cardiovascular endurance, muscular strength, muscular endurance, and body composition. Students will also study principles of training, skill related fitness components, nutrition, the muscular and skeletal systems, and will develop their own personal fitness plan and goals.

## **GEORGIA PERFORMANCE STANDARDS**

PEHS.1: Demonstrates competency in motor skills and movement patterns needed to perform a variety of physical

activities.

PEHS.2: Demonstrates understanding of movement concepts, principles, strategies, and tactics as they apply to the

learning and performance of physical activities.

PEHS.3: Participates regularly in physical activity.

PEHS.4: Achieves and maintains a health-enhancing level of physical fitness.

PEHS.5: Exhibits responsible personal social behavior that respects self and others in physical activity settings.

PEHS.6: Values physical activity for health, enjoyment, challenge, self-expression, and/or social interaction.

#### **GRADING PROCEDURES:**

#### **Classroom Grades**

Participation 80% Students may earn a total of 20 points per day. 20 points for participation/effort when in the classroom/gym. You will earn FIT points each day from your **Heart Zones** monitor system. You will record your FIT points each day we use the monitor system. To earn your participation points for any day you are absent from class, you will have to write a one-page report on a personal fitness topic.

Fitness Gram: \*10% Final Exam: 10%

Fitnessgram Assessments: A. Sit and Reach B. Curl-ups C. Push ups D. Height E. Weight F. Mile run or Shuttle Pacer Test

#### **CANES CODE**

Commit to excellence
Own your own Behavior
Demonstrate Respect
Exhibit a Positive Attitude

#### **PARTICIPATION**

1. You will earn points each day by participating in class activities. You may earn a total of 20 points each day for participation/Effort. There will be no sitting or standing (unless you have a doctor's note) when we are in the gym. You MUST be physically active. You will utilize the **Heart Zone System** tool each day in class. You will be expected to earn FIT points daily. Your heart rate monitor will be set for your individual heart rate and step zones based on your true ability.

#### **CLASS EXPECTATIONS:**

- 2. Be in assigned attendance area when the bell rings. Tardies will be counted!
- 3. All excused absences must be made up, Students have 3 days to bring in a note. Unexcused absences result in a grade of 0 for the day. A note from parent will suffice for one to two days of inactivity. After two days, a note from a doctor is required to be excused without penalty from participation. Absence days will need to be made up with a 1 page report on a fitness activity
- 4. Respect administrators, teachers, students and equipment.
- 5. Do not wear jewelry while participating, especially in the weight room.
- 6. Do not bring any valuables into the locker room or gym.
- 7. We are not responsible for items left unlocked during class time.
- **8.** Keep the gym neat. **NO OUTSIDE** food or drink in gym (except water )-
- 9. Wear your heart rate monitor properly and return in to its proper storage unit after each class.
- 10. No one is allowed in the halls or to go to the restroom without permission
- 11. No Cell Phones should be visible during class without permission

### CLASS ACTIVITIES:

Activities during the semester for Personal Fitness may include:

- We will exercise daily. We will typically begin with curl-ups, pushups, and stretching.
- Jogging, walking, strength training, fitness games, and designing a personal fitness plan

# **PHYSICAL EDUCATION CLASSES**

## Parents,

Please sign that you have read the syllabus and understand the course expectations. In addition, Please list and explain any condition or physical limitations that have to be considered while your child is taking this course.

Student's Name:	
Physical Limitations:	
If any please explain:	
Allergies:	
Parent email address	
Phone Number	_
Student Signature:	-
Parent Signature:	_
Date	

As of 8/4/23