Health and Physical Education Information Sheet
Hollenbeck Middle School

Mr. Borgschulte, Principal

Mrs. Hamer, Assistant Principal

(636) 851-5400

Mission Statement

To provide a positive learning environment, appropriate instruction and sequential skill development in order to maintain a healthy body, mind, and character. Our program is designed to promote participation and a life long commitment to a healthy lifestyle through enjoyable activities.

Physical Education Department

Mrs. Ziegler 10:25 –11:14 Mrs. Knowlton 7:46 - 8:35
Mr. Smith 8:39 - 9:28 Mr. Darks 9:32–10:21
*This would be the best time to contact your child's teacher.

To E-mail us: christine.ziegler@fhsdschools.org ryan.darks@fhsdschools.org

debra.knowlton@fhsdschools.org ryan.smith@fhsdschools.org

If you would prefer to speak with us on the phone we can be reached at:
The male Teachers: **Mr. Smith 851-6451** **The Female Teachers: Mrs. Knowlton 851-5355**
Mr. Darks 851-5354 **Mrs. Ziegler 851-6253**

Injury and Illness Policy

There may be instances when your child will not be able to participate due to an injury or illness. In order to be excused your child must bring a note excusing them from participation. All notes must be taken to the **school nurse** before school.

- **A Parent Note** will excuse a student from physical education for a maximum of three (3) days. **The student is still expected to dress out, when excused by a parent note. No more than two parental excuses a semester will be accepted.**

- **A Doctor's Note** will excuse a student from **participation and from dressing out.**

Personal Property

Each student is issued a locker and a combination lock in order to secure his/her belongings while participating in physical education. **Students are not to share lockers or combinations with others**. **All locks are to be locked during P.E. class.** Students are held responsible for all items in their locker. It is recommended that students bring a zip lock bag or small box to protect jewelry. Students should **notify a teacher immediately if a lock is missing**. If the lock is not recovered a student may purchase a replacement lock for $7.00 (Please make checks payable to the Francis Howell School District). It is recommended that students do not bring large sums of money to school. Lost or stolen items should be reported immediately.

Class Conduct

Students are expected to follow the same behavioral expectations in Physical Education as they do through out the school day. However, students **may NOT chew gum** in physical education class. Students are expected to be dressed out and in their squads five minutes after the bell has rung. No glass is to be brought into the locker room and no aerosols such as Axe deodorant spray.

Physical Education Clothing

The dress code established by the Francis Howell School District Physical Education Department is designed to provide a healthy and safe environment. It is suggested that your child purchase a uniform to maintain compliance. Uniforms may be purchased through your child's teacher. At a cost of $5.00 for a shirt and $6.00 for shorts (Please make checks payable to the Francis Howell School District). Jackets and or warm-ups may be worn when weather conditions warrant them. Other requirements include:

- Athletic tennis shoes (must be laced and tied, no heels, or hiking boots)
- Cotton athletic socks
- Shirts will be marked at school with a permanent marker indicating students name (**Instructors will do this**)
- Shirts may not be tied.
- Shorts may not be rolled.
- No jewelry may be worn during participation
  - New piercing may be worn for a period of eight (8) weeks, but they must be covered with tape furnished by the student.
  - In order to wear a piercing the student should submit a note from their parent to their teacher requesting this.
  - Failure to follow these guidelines will result in an inability to participate and a loss of participation points.
  - Students wishing to wear a tongue ring must submit a note to the nurse.

Physical Education Grades

Grades will be determined by:

- dressing out (students not dressed out will have an alternate activity)
- written work
- participation
- class conduct
- sportsmanship

Students will lose points for the following violations:

First No Dress	-10 points
Second No Dress	-20 (a note is sent home informing parents)
Third No Dress	-30 (A detention is issued)
Poor Participation	-10
Inappropriate Dress, gum or jewelry	-5
Uncooperative or unsportsman like conduct	-5

Physical Education Classes

During the first and fourth quarters students will participate in physical education daily. During the second and third quarters students will alternate every 4 weeks between health and physical education. During the Health portion of instruction students will be assigned a book. The approximate cost of the books is $40.00 each. Students failing to respect classroom materials will be fined accordingly.

Health Curriculum Topics

6th Grade	7th Grade	8th Grade
Consumer Health	First Aid	Wellness
Personal and Family Health	Growth & Development	Growth & Development
Body Systems	Body Systems	Body Systems
Nutrition	Conflict Resolution Skills	Diseases
Social Systems	Substance Abuse	

6th Grade	7th Grade	8th Grade
Best Choice-Thrive St. Louis www.bestchoicestl.org	Best Choice-Thrive St. Louis www.bestchoicestl.org	Best Choice-Thrive St. Louis www.bestchoicestl.org
The Child Care Center Inc.	The Child Care Center Inc.	The Child Care Center Inc.
The Crider Center	The Crider Center	The Crider Center
Youth In Need	Youth In Need	Youth In Need
American Red Cross	American Red Cross	American Red Cross

Please read and sign <u>front AND back!</u>
Parent Permission Form for
Human Growth and Thrive
Thanks!
Hollenbeck Physical Education Department

st. louis thriVe® Operating Best Choice℠

Dear Parents/Caretakers,

Thank you for reading this important letter. The ThriVe® St. Louis program is designed to teach your student about making healthy choices with life goals in mind. Topics we address include how media influences young people, healthy relationships, sexually transmitted infections (STI's), abstinence and teen pregnancy. This program will be presented during your student's regular school day.

Please read the information on this letter, check the appropriate box and sign at the bottom. Return this completed form to your student's school.

We administer a 5-minute student evaluation of the program at the end of the presentation. This information is used to help improve programs like ours. All of the answers are confidential. We are asking your permission to report group results as evaluation research.

QUESTIONS: If you have any questions or concerns about the program at any time please contact the Program Director, Sherry Cybularz at the phone number listed below.

CONSENT: I have read this consent form (or it has been read to me). All my questions have been answered or I do not have any questions. Signing below means that I agree to let my student participate in the ThriVe® St. Louis program and to complete the survey. By signing this consent form, I have not given up any of my or my child's legal rights.

Thank You,
Sherry Cybularz, PROGRAM DIRECTOR, Best Choice℠ operated by ThriVe® St. Louis, 314.991.7990 x1784.

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Please check ONE box you consent to, complete information below and sign at the bottom:

Child's Name:_____
(Please Print)

☐ **I GIVE permission** for my child to participate in the ThriVe® St. Louis **Program**

☐ **I DO NOT give permission** for my child to participate in the ThriVe® St. Louis **Program**

_____ Parent/Caretaker Signature

_____/_____/_____ Date

For more information visit us at bestchoicestl.org

HG&D PARENT PERMISSION LETTER/FORM
SCHOOL NAME

Dear Parent,

As part of the Body Systems Unit in the middle school Health curriculum, your son/daughter will have the opportunity to study the human reproductive system. This lesson(s) contains information on human growth and development. *According to Missouri State statue (170.015):*

- ***Parents have the right to remove their student from this portion of the health course.***
- ***A signed parent permission slip is required of each student before being allowed to participate in classroom instruction.***
- ***Instructional lesson plans and materials are to be available for parent preview upon request.***

The curriculum objectives for each grade level are listed on the reverse side of this letter. Classes will be coeducational for the body systems unit. Middle school health is generally taught during the second and third quarter. Exact timing of the instruction of this unit and a preview of the lessons and materials used may be obtained by contacting your child's teacher.

Below is a parent/guardian permission form that needs to be returned by all students. If your child does not return the permission form before the scheduled lesson(s), he/she will not be able to participate in the classroom instruction.

Grade 6, 7, 8 Date: _____

My child, _____

may _____ may not _____

participate in the human growth and development portion of the Body Systems Unit.

_____
(signature of parent/guardian)