

**San Dieguito Union High School District  
Independent Study Physical Education  
(I.S.P.E.)**

**2017-18**

The following items must be on file before your Independent Study application is eligible for consideration. All paperwork must have original signatures and be readable and must be submitted by the close of ISPE, June 2, 2017 @ 3:30 p.m. **No partial I.S.P.E. packets will be accepted.**

**COMPLETE THE FOLLOWING:**

→ **Online I.S.P.E. Contract (Opens April 17, 2017 @ 8:00 a.m.) (Keep a copy for your records)**

→ **I.S.P.E. Packet**

**Includes I.S.P.E. requirements and the following mandatory forms:**

- **Coach/Instructor's Statement of Responsibility (Form A)**
- **Coach/Instructor's Hold Harmless Agreement (Form B)**
- **Parent Release of Liability (Form C)**
- **Certificate of Liability Insurance – Obtained from the coach providing the Independent Study Physical Education**  
*All I.S.P.E. coaches/instructors must carry General Liability insurance in the amount of 1 million dollars for the activity in which they are giving instruction. It is the coach/instructor, not the property, that must be insured. Homeowner policies, Declarations, Summaries, bills, invoices, etc. are not acceptable proofs of insurance and will result in automatic denial of I.S.P.E.*

**All I.S.P.E. students must have the online contract and a complete I.S.P.E packet (Forms A-C and the Certificate of Liability Insurance) submitted by June 2, 2017 @ 3:30 p.m. to be considered for 2017-18 I.S.P.E.**

## Independent Study Physical Education (I.S.P.E.) Requirements

San Dieguito Union High School District

1. Student participation on national, regional, district or community athletic team sports such as baseball, basketball, football, lacrosse, soccer, softball and volleyball will not be granted Independent Study P.E. credit. Per CIF 600.2.A
2. The I.S.P.E. courses must develop proficiency, knowledge, and skills that cannot be achieved within the in-school physical education program. Year-long goals must be developed with the I.S.P.E. coach and student to reflect unique growth through their I.S.P.E. program and align with [California State Physical Education Standards](#) and [Physical Fitness Test](#) requirements.
3. The direct instruction requirement must be equal to or exceed the hourly requirement of the State of California P.E. statute. That requirement is 400 minutes every 10 school days/2 weeks. There are a total of 4 quarters each year, and the student must meet a minimum of 1800 minutes or 30 hours for each of those quarters.

*EC Section 51223, "All pupils, except pupils excused or exempted pursuant to Section 51241, shall be required to attend upon the courses of physical education for a total period of time of not less than 400 minutes each 10 schooldays" (EC Section 51222[a]).*
4. Students on an Individualized Education Plan (IEP) who are enrolled in I.S.P.E. must follow all course requirements.
5. The parent will be required to sign a District Liability Waiver (form C) which holds the District harmless from any liability or claims as a result of the I.S.P.E. program.
6. I.S.P.E students are **NOT** allowed to be instructed/coached by their parent/guardian. No exceptions.
7. All I.S.P.E. instructors/coaches are required to sign a Statement of Responsibility (form A) and Hold Harmless Agreement (form B) provided in this packet. Instructors/coaches must also carry 1 million dollars in Commercial General Liability insurance for the activity in which they are giving instruction. (Homeowners policies, Declarations, Summaries, bills, invoices, etc. do not meet the District's qualifications or standards as proof of insurance – see sample certificate of insurance provided in this packet).
8. Second semester 7<sup>th</sup> and 9<sup>th</sup> grade I.S.P.E. students must contact a school P.E. teacher to find out when they can participate in the state-mandated physical fitness testing. It is the student's responsibility to find out when the testing will occur, to schedule the testing with the instructor, and to attend the regular P.E. classes during the testing period. Students who fail to complete Physical Fitness Testing or fail to meet the requirements will not be eligible for I.S.P.E. in the subsequent school year.
9. Students in grades 11 and 12 who have completed their two years of P.E. credit for graduation may take I.S.P.E. as an elective if they meet all of the criteria for participating in I.S.P.E.
10. The parent/guardian agrees to undertake all transportation of the student to and from I.S.P.E. The District will not provide transportation.
11. The I.S.P.E. course must be part of the student's regular bell schedule. I.S.P.E. may NOT be an additional period with the exception of students who participate in the school's music program. Those

students may be eligible to apply for I.S.P.E. as one additional period. For non-music students, if the school has a seven period day, I.S.P.E. must be one of seven classes, NOT an eighth class.

12. Students must abide by their school's open or closed campus policy during their I.S.P.E. class. Any violation of this policy could result in removal from the I.S.P.E. program by site administrators.
13. While the schools will establish certain requirements in implementing this policy, the San Dieguito Union High School District and its schools are not responsible for the quality or conditions of instruction conducted off school premises in the I.S.P.E. program. Students who want to return to the general PE program at their school of attendance will only be eligible to return to the general PE program at the start of a semester.
14. All I.S.P.E. students must have the online contract and paperwork (Forms A-C and the Certificate of Liability Insurance) submitted by Friday, June 2, 2017 @ 3:30 p.m. to be considered for I.S.P.E.
15. Students enrolled in an online Health course must complete the course by the course enrollment deadline for the 2017-18 school year. 9<sup>th</sup> grade students who do not complete online Health by the end of their 9<sup>th</sup> grade year will be placed in Year One PE for their 10<sup>th</sup> grade year. Students who fail to complete the online Health course by the deadline will not be eligible for I.S.P.E. for the 2018-19 school year.
16. Students in grades 7 – 8 must enroll in I.S.P.E. for the full year, and must submit the online contract and the mandatory forms by June 2, 2017 @ 3:30 p.m. or your student will be enrolled in "Year One" PE on campus.
17. Students enrolled in I.S.P.E. are not to change their activity mid-year. A coach change is only permitted with the approval of a site administrator.

**San Dieguito Union High School District**  
**Independent Study Physical Education (I.S.P.E.)**  
**Course Requirements**

1. The participation requirements must equal or exceed the hourly requirement of the State of California statute. That requirement is 400 minutes every 10 school days/2weeks.
2. I.S.P.E. logs must be submitted to designated site administrators/I.S.P.E. coordinator each quarter. The logs must indicate days and hours of instruction. During the first week of school every ISPE student will attend a mandatory meeting to learn how to use the online class for I.S.P.E. as well as how to submit required I.S.P.E logs.
3. At the end of each semester, two evaluations of student progress toward established goals are required. During the last week of each semester, students will submit a self-evaluation and coach's evaluation.
  - (a) Student Evaluation of his/her success in attaining the stated goals, and a statement indicating revised and/or new goals that the student has for I.S.P.E. for an additional semester.
  - (b) Coach's Evaluation is a one-page statement personally written and signed by the I.S.P.E. coach/instructor evaluating the student's semester participation and progress toward goals.
4. All second semester grade 7<sup>th</sup> and 9<sup>th</sup> grade I.S.P.E. students must make arrangements with the I.S.P.E. coordinator to take the state-mandated California Physical Fitness test. The results of the test must be recorded, signed and dated by the physical education instructor administering the test. This information must be turned in during the second semester. Students who fail to complete mandated Physical Fitness Testing or fail to meet the requirements will not be eligible for I.S.P.E. in the subsequent school year.

**Dropping an Independent Study P.E. Course**

1. A student may drop a class anytime during the first four weeks of a semester (two weeks for the 4 X 4 schedule) without a grading penalty on the student transcript, if approved by the parent/guardian and school counselor.
2. After the fourth week (second week for the 4 X 4 schedule) of the semester a student who drops a class will receive a withdraw/no credit on the student transcript.
3. No class may be dropped within 30 school days (15 days for the 4 X 4 schedule) of the final grading period, nor may any class be added for transfer units within 30 school days (15 days for the 4 X 4 schedule) of the final grading period.
4. Students who want to return to the general PE program at their school of attendance will only be eligible to return to the general PE program at the start of a semester.

School Site \_\_\_\_\_

**San Dieguito Union High School District  
Independent Study Physical Education**

**INSTRUCTOR'S STATEMENT OF RESPONSIBILITY**

The outside independent agency/instructor/coach must submit this completed form and meet specific District criteria related to liability prior to being approved as an independent study agency for a student.

The supervision of I.S.P.E. activities must be performed by a coach who is at least 21 years of age, who has a certificate or credential in that activity, or who has participated for at least 4 years at a collegiate/world class level in that activity. As such, you are required to describe your background and experience that qualify you or your agency for training at this level. This must be attached to this instructor's Statement of Responsibility. Please also attach a resumé for the instructor who will be doing the training.

I understand the concept of the Independent Study Physical Education program and accept the responsibility as \_\_\_\_\_ coach. I understand the requirements  
(Student's name)

associated with this request to provide I.S.P.E. to students in the San Dieguito Union High School District in the conduct of this program. We agree to assume all responsibility for \_\_\_\_\_  
(Student's name)

I will personally instruct this athlete for a minimum of 400 minutes every 2 weeks / 10 school days while school is in session. In addition, I will sign his/her time logs, as well as PERSONALLY write and sign his/her quarter and semester evaluations which will include a one page statement evaluating the athlete's participation and progress towards stated goals and objectives.

If there are any questions regarding the I.S.P.E. program, or your athlete, please contact the I.S.P.E. Coordinator at the athlete's school site.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Agency/Instructor/Coach's (Print Name)

\_\_\_\_\_  
Phone number

\_\_\_\_\_  
Agency/Instructor/Coach's (Signature)

\_\_\_\_\_  
Athlete's name

**SAN DIEGUITO UNION HIGH SCHOOL DISTRICT**  
**INDEPENDENT STUDY PHYSICAL EDUCATION**

**HOLD HARMLESS AGREEMENT**

**(AGENCY/ INSTRUCTOR/ COACH)**

\_\_\_\_\_ hereby agrees to defend, indemnify and  
(Agency/Instructor/Coach)  
hold the San Dieguito Union High School District, its directors, officers, agents, employees and individual members, free and harmless from and against any and all liability, claims, demands, causes of action at law or equity, expenses and costs (including attorneys' fees), or loss of any sort of personal injury (including death) and property damage that may arise during or because in any way by such use, operation, occupancy, acts, omissions, and/or condition of premises under Independent Study Physical Education Program participation.

\_\_\_\_\_ further agrees, pursuant to the hold harmless  
(Agency/Instructor/Coach)  
agreement above, to procure and maintain at its sole expense Commercial General Liability insurance with limits no less than \$1,000,000 combined single limit per occurrence for personal injury and/or property damage. Agency/Instructor/Coach shall provide the District with a certificate of insurance (Accord Form 26-S) evidencing all required coverage.

Agency/Instructor/Coach understands and agrees that he/she and all of his/her employees or agents shall not be considered officers, employees or agents of the San Dieguito Union High School District as they relate to the Independent Study Physical Education program.

DATED: \_\_\_\_\_

By: \_\_\_\_\_  
Signature of Agency Rep./Instructor/Coach

**San Dieguito Union High School District**  
**2017/2018 School Year**

**PARENT RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT FOR**  
**INDEPENDENT STUDY PHYSICAL EDUCATION PROGRAM PARTICIPATION**

This is a release of liability and assumption of risk agreement. Read it carefully and sign below. Completion of this release is a prerequisite to participation in Independent Study Physical Education Program. This release essentially says the student named below is going to participate in an Independent Study Physical Education Program which involves inherent risks to participants. If he/she is hurt, injured, or even dies, you (i.e., the student, parents and heirs) will not make a claim against or sue the San Dieguito Union High School District, its Board of Trustees, officers, employees, volunteers, and agents, or expect them to be responsible or pay for any damages.

We, the undersigned, understand and acknowledge that \_\_\_\_\_ has voluntarily chosen to  
(Name of Student)  
participate in an Independent Study Physical Education Program. We know and fully understand that any physical education activity, including, but not limited to \_\_\_\_\_ involves numerous risks, dangers, and hazards, both  
(Name of Activity)

known and unknown, where serious accidents can occur, participants can sustain physical injuries, damage to their property, and even die. Regardless of whether the athletic activity involves physical contact or not, all athletic activities and sports have inherent risks of injury which are inseparable from the activity and cannot be entirely eliminated regardless of the care taken by players, instructors, coaches, trainers, or other staff. Furthermore, we understand that while the school district may establish certain requirements in implementing the Independent Study Physical Education Program, neither the District nor its schools are responsible for the quality or conditions of instruction involved with this program in that it involves physical activities which are off of school district premises and are not organized or supervised by the school district. We acknowledge and willingly assume all risks and hazards of potential injury and death which may arise out of participation in this Independent Study Physical Education Program, including any transportation to or from any such program.

\_\_\_\_\_’s participation in this Independent Study Physical Education Program is purely  
(Name of Student)  
voluntary and it is being done at his/her own risk.

In consideration for San Dieguito Union High School District allowing the above-named student to participate in this Independent Study Physical Education Program, we voluntarily agree to release, waive, discharge, and hold harmless San Dieguito Union High School District, its Board of Trustees, officers, employees, volunteers, and agents from any and all claims of liability arising out of their negligence, or any other act or omission which causes the student illness, injury, death and damages of any nature in any way connected with the student’s participation in this program. We also expressly agree to release and discharge San Dieguito Union High School District, its Board of Trustees, officers, employees, volunteers, and agents from any act or omission of negligence in rendering or failing to render any type of emergency or medical services.

As parent or legal guardian of the student/participant under 18 years of age, I have read and voluntarily agree that my son/daughter may participate in this Independent Study Physical Education Program, and I sign this release on his/her behalf. In signing this document, I fully recognize and understand that if my son/daughter is hurt, dies, or his/her property is damaged, I am giving up the student’s right and the rights of the parents and heirs to make a claim or file a lawsuit against San Dieguito Union High School District, its Board of Trustees, officers, employees, volunteers, and agents.

California Law provides as follows: “All persons making the field trip or excursion shall be deemed to have waived all claims against the district or the State of California for injury, accident, illness, or death, occurring during or by reason of the field trip or excursion. All adults taking out-of-state field trips or excursions and all parents or guardians of pupils taking out-of-state field trips or excursions, shall sign a statement waiving such claims.” (Education Code Section 35330)

WE, THE UNDERSIGNED, HAVE READ THIS DOCUMENT. WE UNDERSTAND THAT IT IS A RELEASE OF ALL CLAIMS. WE FURTHER UNDERSTAND THAT WE ARE ASSUMING ALL RISKS INHERENT IN THIS INDEPENDENT STUDY PHYSICAL EDUCATION PROGRAM. WE VOLUNTARILY SIGN OUR NAME AS EVIDENCE OF OUR ACCEPTANCE OF THE ABOVE PROVISIONS, PARTICIPATION IN THE PROGRAM AND ANY FIELD TRIP OR EXCURSION ASSOCIATED WITH IT.

_____ Student/Participant Signature	_____ Date
_____ Parent/Guardian Signature	_____ Date

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)

PRODUCER

**ISPE**  
Low Limit GL

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

**INSURERS AFFORDING COVERAGE**

INSURED

**Coach/Company Name**  
**Address**  
**City, State Zip**

INSURER A:  
INSURER B:  
INSURER C:  
INSURER D:  
INSURER E:

**COVERAGES**

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	<b>GENERAL LIABILITY</b>				EACH OCCURRENCE \$ <b>1,000,000</b>
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire) \$
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$
					PERSONAL & ADV INJURY \$ <b>1,000,000</b>
					GENERAL AGGREGATE \$ <b>2,000,000</b>
					PRODUCTS - COMP/OP AGG \$ <b>2,000,000</b>
		GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			
	<b>AUTOMOBILE LIABILITY</b>				COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS				
	<input type="checkbox"/> NON-OWNED AUTOS				
	<b>GARAGE LIABILITY</b>				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$
					AUTO ONLY: AGG \$
	<b>EXCESS LIABILITY</b>				EACH OCCURRENCE \$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
					\$
	<input type="checkbox"/> DEDUCTIBLE				\$
	<input type="checkbox"/> RETENTION \$				\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>				WC STATUTORY LIMITS OTH-ER
					E.L. EACH ACCIDENT \$
					E.L. DISEASE - EA EMPLOYEE \$
					E.L. DISEASE - POLICY LIMIT \$
	<b>OTHER</b>				

**SAMPLE**

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

RE: Independent Study Physical Education

For: List specific team or organization covered under this policy

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER:

CANCELLATION

**San Dieguito Union High School District**  
**710 Encinitas Blvd**  
**Encinitas, CA 92024**

The District's name and address must appear here--"Proof of Insurance" is NOT acceptable

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL \_\_\_\_\_ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.  
AUTHORIZED REPRESENTATIVE