

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