# Franklin Academy

Course Personal Fitness
Instructor Coach Armstrong
School Year 2013/2014

Meetings 7:45am or 3:45 pm

#### **Instructor's Contact Information**

Office Phone	(919) 453-5090 Ext. 142			
Email Address	Armstrongm@franklinacademy.org			
Planning period	5 <sup>th</sup> Period			
Other Information	Emails will be checked between 7am and 7pm and grades will be posted weekly.			
Syllabus Changes	Instructors reserve the right to make changes to the syllabus as needed, and you are responsible for keeping up with those changes. Please log on regularly to <i>Powerschool</i> to get the most current information.			

# **Course Description**

This conditioning class will focus on optimizing physical fitness in each of the 10 recognized fitness domains in exercise science. They are: Strength, Power, Agility, Balance, Flexibility, Speed, Stamina, Cardiovascular Endurance, and Coordination. Students will engage in a variety of activities focusing on the 10 components to promote physical fitness and performance in a variety of sports. Students will learn fundamental concepts and functional movements that can be incorporated in day-to-day activities and will apply concepts learned to design a personal conditioning program.

<u>Methodology</u>: Principles from NASM (National Academy of Sports Medicine) and from Crossfit Elite Fitness will be utilized and practiced.

**Teacher Qualifications**: B.A (Recreation and Leisure Studies) East Carolina University

M. A (Physical Education) Pembroke University NC Teachers license in Physical Education.

Franklin Academy Golf Coach

#### **Required Attire:**

Navy Blue Athletic Shorts, Franklin Academy T-Shirt, and Proper Athletic Shoes.

You may purchase shorts/PE shirts from Coach Armstrong throughout the semester

Shirt Cost: \$7.50 Short Cost: \$7.50

Extra Long shorts Cost: \$9.00

# **Grading Scale:**

### 70% Participation

Students will start out each quarter with a 100 average for participation. They will lose 5 points from their average for each day they don't dress out. Also, failure to participate in class activities will result in a deduction of points.

# 20% Assignments/Tests

Periodically we will be meeting in a classroom or mezzanine for some practical work. All students will have the opportunity to apply concepts learned to create an appropriate workout for the class. Students will also have a fitness test that shows improvement over the 9 weeks.

#### 10% Record Keeping

Students will be required to keep a record of workouts. This is used to track progress throughout the semester.

Midterm Exam: Student Lead WOD and Fitness Test 25% of Grade

#### Valuables

1. The school or the teacher is not responsible for any stolen or lost items.

#### Students may be excused from participation under the following circumstances:

- 1. Excused absence from school
- 2. Parent written note for up to 2 days
- 3. Doctor's note due to injury or illness

#### **Rules and Procedures:**

- 1. Students must be <u>on the gym floor</u> before the tardy bell rings, or they will counted tardy.
- 2. Students will be given 5 minutes to change at the beginning of class. Failure to comply will result in a loss of participation points.
- 3. All large jewelry, watches, hoop and large earrings, and bracelets should be removed <u>before exiting the locker room</u>.
- 4. Students are not allowed in the coach's office, equipment room, locker rooms, mezzanine, weight room, or hallways without permission.
- 5. No spray on product is allowed in the gym/locker room. Only roll-on or stick deodorant.
- 6. Report any injuries to the teacher immediately.
- 7. NO gum, candy, food or drinks are allowed in the gym.

# **Personal Fitness**

Instructor: Mr. Armstrong
Email – <u>Armstrongm@franklinacademy.org</u>
Phone – 919-453-5090 Ext. 142

# \*Medical Conditions

Please list below any special considerations – medical and/or physical – that might hinder participation in the physical education part of this class, also please provide me with anything that would help facilitate their success. I would be glad to set a time for us to meet if you would like to discuss further.
Please sign below and return to Mr. Armstrong after you have read and understand all of the above rules and guidelines.  Date:
Parent /Guardian Name (Please Print)
Parent/Guardian Signature:
Student Name (Please Print)
Student Signature