

Independent Study Physical Education (ISPE)

Introduction: At Maranatha Christian Schools, we strive to support students in their pursuit of excellence in academics, athletics, and arts. The ISPE program is designed for students engaged in rigorous individual sports at a regional, state, or national level that require a commitment beyond the traditional physical education curriculum. This program reflects our dedication to nurturing God-given talents and fostering discipline, integrity, and excellence.

Our recommendation is that all students participate in our on-campus physical education program. However, for exceptional student-athletes competing as individuals at regional, state, or national levels, we offer the Independent Study Physical Education (ISPE) program. This opportunity allows qualified junior high and high school students to tailor their physical education experience to support their competitive training and performance goals.

Core Values and Beliefs:

This program supports students in their journey of faith, character development and physical excellence. The partnership between families, instructors, and Maranatha Christian Schools ensures that the ISPE program aligns with our mission to develop well-rounded disciples of Christ.

Parental Release and Agreement:

We acknowledge the inherent risk associated with physical activities and agree to hold Maranatha Christian Schools harmless for any injuries sustained during ISPE activities. We affirm our commitment to the program's requirements and core values.



Independent Study Physical Education (ISPE) Program Application

The ISPE program is intended for activities where students compete at state, regional, or national levels. The primary distinction for eligibility lies in the activity being a structured and competitive program rather than a recreational one. *ISPE is not available for team sports.*

The following competitive sports have been approved by MCS for the Off-Campus Independent Study Physical Education Program: Dance, Rock Climbing, Gymnastics, Ice Skating, Swimming, Water Polo, Hockey, Cycling, Equestrian, and Tennis. (Other activities may be approved on a case by case basis).

Program Requirements:

- The activity must include a structured training and weekly practice schedule:
 - Minimum of 10 hours per week
- Applicants must provide documentation of prior competition or performance at the regional (Northern, Central, or Southern California), state, or national level. This documentation must be submitted to the school administrator.

Special Note for Dance: For students pursuing dance, eligibility requires membership in a studio or performance company through an audition process.

Program Expectations:

The student will be held responsible for maintaining their programs and keeping up with the communication between their individual coaches/instructors and the ISPE Coordinator.

Due to the independent nature of the program, a large part of the grade that the student receives will be based upon his/her accomplishment of the agreed objectives, contract requirements, and his/her communicating this information to the ISPE coordinator in a timely manner. The following requirements must be met as part of the independent study in order to receive credit.

- 1. Every five weeks an ISPE log must be submitted indicating days and hours of participation signed by the instructor and parent/guardian, and an end of semester student summary will also be required.
- 2. Every five weeks and end of semester, a one-page statement, personally written and signed by the ISPE coach/instructor must be submitted. It should include an evaluation of the student's semester participation and progress (see last page of the application).

Appeal Process:

If the ISPE request is denied, a written appeal may be submitted to the ISPE program administrator requesting acceptance of the original application.

The written appeal should specifically address why the proposed request should be accepted and how it meets any and all school criteria. It could also contain any corrections of misunderstood information or additions or adjustments to the original request. The appeal will be reviewed by the program administrator and division principal. You will be notified following careful consideration of the appeal.



Off-Campus Independent Study Physical Education

2025-26 School Year Calendar of Deadlines

For First Semester of the 2025-26 School Year: (August 2025)

March 26, 2025	Forms available online at <u>www.maranathachristianschools.org</u>
April 28, 2025	Application return deadline (please note Easter Break from April 18-25)
May 12, 2025	Notification of approval or denial
May 23, 2025	Appeals deadline
June 2, 2025	Notification of decision by email
August 18, 2025	New student application deadline (NEW TO SCHOOL ONLY)

For Second Semester of the 2025-26 School Year: (January 2026)

Oct. 1, 2026	Forms available online at www.maranathachristianschools.org
Nov. 1, 2026	Application return deadline
Nov. 15, 2026	Notification of approval or denial
Dec. 1, 2026	Appeals deadline
Dec. 15, 2026	Notification of decision by email



Complete the following application by providing the requested information.

Student Name:	_Grade:	Activity:
Parent/Guardian Name(s):		_
Parent/Guardian Name(s):		_
Location of Activity:		
Parent Email		
Home Phone:		
Parent/Guardian Name(s):		_
Daytime Phone - Mother:		
Daytime Phone - Father:		
Circle semester of ISPE that stu	udent is applying for:	

Semester 1 Semester 2



Application Checklist		
STUDENT NAME:		
GRADE 2025-2026 SCHOOL YEAR:		
SPORT ACTIVITY:		
STUDENT AND PARENT FORMS:		
 Master Contract and ISPE Instructor's Statement of Responsibility Teacher/Instruction/Coach Information Form Acknowledgements and Acceptance page General Lesson Plan 		
REQUIRED ATTACHMENTS:		
 Athlete Documentation: 2 previous Competition/Performance Records that demonstrate regional, state, or national rank/competition. Results with athlete's name must be: Printed on the organization's letterhead OR Printed from the organization's website Competition schedule: Documents to show <i>upcoming</i> regional, state, or national competitions that the athlete will be participating in within each semester. 		
 PROOF OF INSTRUCTOR/COACH QUALIFICATION: Copy of certification by state or national coaching organization. Copy of CPR certification. 		
DANCE DOCUMENTATION REQUIREMENTS (in addition to the above requirements):		
 Studio or Performance Company Contract (signed & dated) Student weekly studio dance schedule: Print-out from studio (must include class description, time and duration, and teacher's name and contact phone number). 		
 FOR CLASSICAL BALLET: The student athlete must audition for, and be accepted to, a nationally recognized elite summer intensive program. Evidence will include an acceptance letter from the program. FOR SOLO or TEAM: List of previous solo and/or team competition pieces, and choreographers names and contact phone numbers (minimum of <u>three</u> required annually). Documentation for these pieces must indicate regional, state, or national competitions in the advanced or elite competitive category only. 		
APPLICATION AND ALL SUPPORTING DOCUMENTATION MUST BE COMPLETED AND INCLUDED WITH APPLICATION BY THE DUE DATE IN ORDER FOR IT TO BE REVIEWED.		
FOR OFFICE USE ONLY		
 Application Approved Application Not Approved Reason Family Notified of decision on: 		



The supervision of ISPE 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 at least 4 years at a college/national or international level in that activity. **The coach may not be a parent of the student applying for ISPE.**

I understand the concept and requirements of the Independent Study Physical Education program and accept the responsibility as the student's coach.

Trained specialist under whom activity is performed:

Name:	 _ Title:

Organization with which the activity is affiliated:

Telephone_____

Objectives and Methods:

What is the student's current competitive skill level:

What competitions/tournaments or performances will the student participate in during the program?

Expected Practice/Training Schedule:

Activity	How often (days per week)	Time in Minutes per session

We have all read and understand this Master Contract, and hereby agree to all of the conditions set forth within and further agree to assist the student in meeting all of the time and work requirements detailed in this document.

Student's Signature	_Date
Parent/Guardian's Signature	_Date
Teacher/Coach/Instructor's Signature	_Date
Date Program Administrator's Signature	_Date



Trained Supervisor under whom the activities will be performed:

Name ______Address ______ Telephone ______ Email Address ______ Organization

Please attach a copy of certification or state or national coaching organization.

1). List the training and education you have received to qualify you to supervise this activity.

2). List any prior experience supervising students in similar situations.

3). List any current activities that further qualify you for this type of student supervision.

Please Note: By identifying yourself as the teacher/instructor/coach of this student for this program, you must be in attendance and supervise any and all practices, rehearsals, competitions or activities.



Student's Acknowledgement

I understand it is my responsibility to participate in this activity for a minimum of 180 hrs. (Equaling 18 weeks of 10 hrs) and meet all standards set by the instructor. I understand that I must submit the proper log sheets every 5 weeks, and a student summary at the end of the semester for evaluation. <u>I understand that I will forfeit all hours completed and receive a fail or unsatisfactory grade if I leave the program, within the allotted time frame, for any reason without first notifying the Maranatha Christian Schools Program Administrator.</u>

Signature of the Student

Parent's Acknowledgement

I acknowledge that Maranatha Christian does not investigate the site(s) of the activities of any program to assess for potential injury. I, therefore, accept full responsibility for any injury that might occur during my student's participation. I also understand that if my child fails to meet either the attendance requirements established by Maranatha Christian or the standards set by the instructor, my child will not receive any Physical Education credit for this study program. I also understand that there will be no tuition discount because of your involvement in this program.

Signature of the Parent/Guardian

Instructor's Approval

I agree to personally supervise the 180 hours that the student needs to be involved in to satisfy the requirements of this program. I also will write and submit a 60 hour and 120 hour evaluation of the student's participation, activities and competitions/performances. The two evaluations should be made on the 5-week and10-week mark, *followed by an evaluation of the student's semester participation and progress due at the end of the grading period for each semester*.



Date

Date



General Lesson Plan

This information should give a general overview of the activities planned for the student and a general idea of the days and timeframes that these activities will occur.

1). Activity schedule

Day	Time	Activity
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

2. Where will the instruction take place?

3. List any special objectives.



ATTENDANCE RECORD (due at the 5-week, 10-week, and end of semester grading period)

Date	Activity/Practice/Training	Times	Hours	
		Start and Stop	Total Time	Cumulative Total
		Total Hours		

I affirm that the above record of participation is accurate and true to the best of my knowledge

Parent Signature_____ Student Signature_____

Coach/Instructor Signature_____



TO BE COMPLETED BY THE ON-SITE INSTRUCTOR AND SUBMITTED BY THE STUDENT AT THE 5-week, 10-week, and end of semester grading period (along with instructor/coach written evaluations).

Competition/Performance Record

Date	Competition/Performance	Verification	

Instructor's Approval

I certify that the student attended, participated in, and met the standards of performance in all of the items listed above.



Independent PE (ISPE) Student Summary

Due Date: The last week of the semester **Length:** Two pages (typed, double-spaced, 12-point font)

Your ISPE Student Summary is an opportunity to reflect on your semester of independent physical education. Be sure to address each section clearly and thoroughly.

1. Statement of Performance Objectives and Self-Evaluation

- What were your goals for this semester of ISPE?
 - Examples: Improving a specific skill, increasing endurance, competing in a tournament, building consistency in training, etc.
- Why did you choose these goals?
 - Explain why these objectives were important to you and how they relate to your sport or physical activity.

Self-Evaluation:

- Did you meet your objectives?
 - Be honest and reflective. Explain whether you fully, partially, or did not meet your goals.
- How did you work toward these goals?
 - Describe the steps you took to achieve your objectives. Include training routines, practices, and any other efforts you made.
- What challenges did you face?
 - Reflect on any obstacles and how you overcame them (or how you plan to in the future).

2. Major Activities and Experiences

- Describe the main activities you participated in throughout the semester.
 - Examples: Training sessions, lessons, competitions, performances, tournaments, or special events.
 - Include the frequency (how often) and duration (how long) of these activities.
- Highlight any significant achievements or milestones.
 - Did you win a competition? Master a new skill? Improve your time or technique? Share these successes!

3. Lessons Learned

- What did you learn from your ISPE experience?
 - Skills: What physical or technical skills did you improve?
 - Personal Growth: How did you develop discipline, time management, or other life skills?
 - Reflection: What surprised you or changed your perspective?
- How will you apply these lessons moving forward?
 - Think about how your experience will impact future training and competitions?



Independent Off-Site Physical Education Evaluation Guide

Instructions for Coaches/Instructors: Thank you for supporting our Independent Off-Site Physical Education (PE) program. To ensure we accurately assess student participation and progress, please provide a written evaluation at three intervals throughout the semester: at 5-weeks, 10-weeks, and the end of the semester. Your feedback is essential in verifying the student's consistent engagement, skill development, and overall performance.

Please complete the following evaluation form and return it to JH/HS Guidance Office by the specified deadlines.

Student Name:

Instructor/Coach Name: _____

- Activity/Sport:
- Evaluation Period (Check One):
 - 🗌 5-week
 - □ 10-week
 - End of semester

Evaluation Criteria:

1. Attendance and Participation:

- How consistently has the student attended scheduled practices or sessions? (e.g., number of sessions attended vs. scheduled)
- Is the student actively engaged and participating during each session?

2. Skill Development:

- What specific skills has the student been working on during this period?
- Describe any noticeable improvements or areas where the student has excelled.
- Are there any areas where the student needs additional growth or focus?

3. Effort and Attitude:

- Does the student demonstrate a positive attitude and willingness to learn?
- How would you describe the student's work ethic and commitment to the activity?

4. Goal Progress:

- Has the student set any specific goals for their physical development or skill improvement?
- What progress has the student made toward these goals?

5. Overall Assessment:

- Based on your observations, how would you assess the student's overall performance and arowth?
- Are there any concerns or recommendations you would like to share?

Instructor/Coach Signature: _____ Date: _____