

# Secondary Education



## PRIVATE STUDY PHYSICAL EDUCATION (PSPE)



**ORANGE UNIFIED SCHOOL DISTRICT  
PRIVATE STUDY PHYSICAL EDUCATION (PSPE)**

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# ORANGE UNIFIED SCHOOL DISTRICT

Education Center

1401 North Handy Street • Orange, CA 92867-4334

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[www.orangeusd.org](http://www.orangeusd.org)

Dear Parent/Guardian:

Thank you for your interest in Orange Unified School District Private Study Physical Education (PSPE) program. California Education Code mandates that all students in grades seven to twelve inclusive participate in physical education courses unless the pupil is excused from participation in accordance with the exceptions in Education Code sections 51222, 51241 and 51242. Further, the Education Code and the OUSD Board of Education also require that all high school students complete two years of physical education in order to be eligible to graduate from high school.

Physical education is part of the coordinated school health system program that incorporates planned, sequential instruction to promote lifelong physical activity, attitudes and behaviors that reduce health risks. Physical education instruction provides diverse sporting activities in the context of a cooperative classroom environment. Physical activity programs that students participate in outside of school are not the same as physical education instructional programs. Such programs typically provide an opportunity for students to develop skills in a single area and are not intended to provide instruction in the essential content areas and standards of physical education. (*EC Section 51220(d) and EC Section 33352(b)(7), California Code of Regulation, Title 5 (5 CCR), Section 10060, and Physical Education Model Content Standards for California Public Schools.*)

Private Study Physical Education program is a voluntary alternative instructional strategy for providing regular education. This type of course requires personal accountability and maturity to set goals and work independently according to a written agreement with the outside instructor under the general supervision of a credentialed teacher. Because private study is an alternative instructional strategy, not an alternative curriculum, students follow the same course of study and meet the same academic standards as classroom-based students.

Please review the entire contents of the PSPE packet to determine if your student is an appropriate candidate for this alternative instructional strategy. The attached documents and conditions must be met/completed prior to PSPE approval. Questions can be answered by the site administrator in charge of physical education.

*Mission Statement: Orange Unified School District, being committed to planning for continual improvement, will provide a curriculum and learning environment of excellence and high expectations to provide each student with the opportunity and preparation to compete in the global economy.*



# ORANGE UNIFIED SCHOOL DISTRICT

## PRIVATE STUDY PHYSICAL EDUCATION (PSPE)

### PROGRAM INFORMATION

#### CRITERIA CONSIDERATIONS

Private Study Physical Education (PSPE) program is a voluntary alternative instructional strategy for providing regular education. This type of course requires personal accountability and maturity to set goals and work independently according to a written agreement with the outside instructor under the general supervision of a credentialed teacher. Because private study is an alternative instructional strategy, not an alternative curriculum, students follow the same course of study and meet the same academic standards as classroom-based students.

A request for Private Study Physical Education allows the student advanced study in activities not normally available in the on-site physical education program. Examples of competitive sports not offered by the Orange Unified School District:

- Dance
- Equestrian
- Gymnastics
- Ice Skating

Students who possess an exceptional talent or ability and are involved in rigorous training for state, regional (multi-state), national or international caliber competitions will be considered. A major factor in determining acceptance or rejection of the request will be the difference between a recreational and an established qualified competitive program. In the case of dance, participants must be an auditioned member of a studio competition team or performance company and be in pursuance of a career in the dance performing arts.

#### COURSE REQUIREMENTS

##### ▪ **Attendance:**

The direct instruction (skill development) requirement must be equal to or exceed the "400 minute every 10 school days" *California Education Code Section 51241*. Additional supervised training, practice competition or performance must meet or exceed a total of 500 minutes every two weeks, for a total of 900 minutes every two weeks.

##### ▪ **Student Goals and Learning Activities:**

Student applicants will work with their outside instructor and supervising credentialed teacher to determine performance objectives for PSPE, specifically "What do you plan to achieve during the time of the PSPE contract?" They will also describe the learning activities that will contribute to successful outcomes for each goal, how they will measure their goal success, and what evidence they will collect to verify goal achievement. Outside instruction must include one of the eight state required content areas: Effects of physical activity upon dynamic health; mechanics of body movement; aquatics; gymnastics and tumbling; individual and dual sports; rhythms and dance; team sports; combatives.

##### ▪ **Daily Time Logs**

PSPE daily time logs must be submitted to the supervising credentialed teacher and the PSPE coordinator every three weeks and finally at the end of the grading period (on the Monday of the last week of the grading period). The logs must show dates and hours of instruction related to individual goals and activities and must be signed by the outside instructor and parent.

▪ **Student Progress Checks and Self-Evaluation:**

The student will meet with the supervising credentialed teacher to review daily logs and goal progress every three weeks and finally at the end of the grading period (on the Monday of the last week of the grading period). At the end of the grading period, student will submit to the outside instructor and the supervising credentialed teacher a written self-reflection summary of his/her success in attaining the personal goals for that quarter.

▪ **Outside Instructor Evaluation:**

The PSPE outside instructor will submit to the supervising credentialed teacher and the PSPE site coordinator a written and signed summary evaluating the student's learning activities, participation and progress at the end of each grading period no later than the Monday of the last week of the grading period.

**PHYSICAL FITNESS TESTS – FITNESSGRAM**

The state mandated California Physical Fitness tests are given in the spring of each year to students in grades 5, 7 and 9. Second semester PSPE students must contact the school administration to arrange for the FITNESSGRAM tests and then attend the regular PE classes during the testing period for test administration. Test results will be available in the fall of the next school year. Students must pass 5/6 components of the FITNESSGRAM to be eligible for the PSPE option.

**NOT AN ELECTIVE COURSE**

The PSPE course must be part of the student's regular bell schedule. PSPE may NOT be an additional period. For example, if the school has a six period day, PSPE must be one of the six classes, NOT a seventh class. Students are required to meet the 240 minimum minutes of seat-time instruction during a regular school day.

**CREDIT FOR GRADUATION**

The number of concurrently earned credit recognized by OUSD toward graduation shall be limited to 20. PSPE credit can be earned under the "Private Study" and/or "Special Studies" options.

**TRANSPORTATION**

The parent/guardian agrees to undertake all transportation of the student to and from PSPE. The District will not provide transportation.

**QUALITIES AND CONDITIONS**

While the schools will establish certain requirements in implementing this policy, the Orange Unified School District and its schools are not responsible for the quality or conditions of instruction conducted off school premises in the PSPE program.

**DROPPING A PRIVATE STUDY PE COURSE**

1. A student may drop a class anytime during the first 20 days of a semester without a grading penalty on the student transcript, if approved by the parent/guardian and school counselor.
2. After the first 20 day period has passed, a student who drops a class will receive a Fail grade for the course.



# ORANGE UNIFIED SCHOOL DISTRICT

## PRIVATE STUDY PHYSICAL EDUCATION (PSPE)

### PARENT/STUDENT CHECKLIST

The following items must be completed and included prior to Private Study Physical Education approval.

#### COMPLETED and SIGNED

- 1. Application
- 2. Contract (requirements and signature page)
- 3. Student Portfolio
  - a. Copy of transcript verifying a 2.0 grade point average (GPA)
  - b. Summary of competition/performance documentation. Attach documentation of competition and/or performance at the state, regional (multi-state), national, or international level.  
Examples may include:
    - i. Official competition records, results, rankings
    - ii. Award/place/participation certificates
    - iii. Media notices
    - iv. Organization membership card/contract
    - v. Other evidence of advancing rank or high level performance
  - c. Calendar of competitive events, performances/contracts
  - d. List of advanced course level enrollment
  - e. Dance participants must include:
    - i. Weekly studio dance schedule
    - ii. List of competitive dance pieces (at least one solo) and choreographer names and telephone numbers.
    - iii. Copy of current competition team or performance company contract, if applicable.
  - f. Healthy Fitness Zone – passing 5/6 components of the California Physical Fitness Test. (Test is taken in the spring of the 5<sup>th</sup>, 7<sup>th</sup> and 9<sup>th</sup> grades.)
- 4. Student Goals and Learning Activities
- 5. Outside Instructor Information
  - a. Qualifications
  - b. Resumé or vitae
  - c. Proof of certification by state or national coaching organization
  - d. Proof of up-to-date First Aid/CPR certification
  - e. Proof of concussion training
  - f. Instructor's Statement of Responsibility
- 6. Hold Harmless and Indemnification Agreement
- 7. Parent Release of Liability and Assumption of Risk Agreement



# ORANGE UNIFIED SCHOOL DISTRICT PRIVATE STUDY PHYSICAL EDUCATION (PSPE)

## APPLICATION

Please read the attached information regarding criteria and procedures for application for students desiring to substitute off-campus athletic participation for daily physical education instruction.

School: \_\_\_\_\_

Student Name: \_\_\_\_\_ Student I.D.#: \_\_\_\_\_

Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Parent Name(s): \_\_\_\_\_  
Mother

Business Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Father

Business Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Period of Application: **Only one trimester/semester.** A new application is required each trimester/semester.

School Year: \_\_\_\_\_  
(check one)

___ Trimester 1/Semester 1	Beginning Date: _____	Ending Date: _____
___ Trimester 2/Semester 2	Beginning Date: _____	Ending Date: _____
___ Trimester 3	Beginning Date: _____	Ending Date: _____

Please choose your qualifying criteria:

Criteria One: To provide exceptionally gifted athletes who are competing at a state, regional (multi-state), national, or international competition or performance with in-depth opportunities. Portfolio documenting competition level to be included.

Criteria Two: To participate in an advanced study of a course adopted by the Orange Unified School District which is not available through the district physical education or extra-curricular program.

Please state your reason(s) for requesting the Private Study Physical Education Program.

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# ORANGE UNIFIED SCHOOL DISTRICT

## PRIVATE STUDY PHYSICAL EDUCATION (PSPE)

### CONTRACT REQUIREMENTS/RESPONSIBILITIES

#### STUDENT REQUIREMENTS

- Understand the requirements and commitments of the Private Study Physical Education (PSPE) course
- Set individual performance goals for the grading period
- Describe learning activities to promote successful completion of goals. Consult with outside instructor to include at least one of these eight state required content areas:
  - Effects of physical activity upon dynamic health; mechanics of body movement; aquatics; gymnastics and tumbling; individual and dual sports; rhythms and dance; team sports; combatives.
- Engage in at least 400 minutes every two weeks of physical activity direct instruction from the outside instructor
- Engage in an additional 500 minutes every two weeks of practice, skill-building, performance/competition
- Maintain accurate daily time logs, verify with appropriate signatures, and submit every three weeks and finally at the end of the grading period.
- Meet with supervising credentialed teacher every three weeks and finally at the end of the grading period (on the Monday of the last week of the grading period) to review daily time logs and goals progress
- Complete a written self-evaluation summary one week prior to the end of the grading period and submit to outside instructor and supervising credentialed teacher
- Should student fail to meet the attendance requirements and student goals, or if he/she leaves the program for any reason without immediately notifying the PSPE administrator, the student may not meet the physical education requirement nor receive credit and the grade could result in a "Fail"

#### OUTSIDE INSTRUCTOR REQUIREMENTS

- Understand the requirements and commitments of the Private Study Physical Education course
- Assist the PSPE student in setting individual performance goals and specific activities needed to promote successful completion of goals
- Provide the PSPE student with at least 400 minutes every two weeks of supervised physical activity direct instruction in at least one of these eight state required content areas:
  - Effects of physical activity upon dynamic health; mechanics of body movement; aquatics; gymnastics and tumbling; individual and dual sports; rhythms and dance; team sports; combatives
- Supervise PSPE student in an additional 500 minutes every two weeks of practice, skill-building, performance/competition
- Supervise, verify and sign PSPE student's recording of daily time logs
- Review PSPE student's end-of-grading-period self-evaluation summary



- Complete a one-page evaluation of the student's participation and progress towards stated goals and objectives. Submit to PSPE site administrator at least one week before the end of the grading period

### **PARENT RESPONSIBILITIES**

- Understand the requirements and commitments of the Private Study Physical Education course
- Assist the PSPE student as needed in setting individual performance goals and specific activities needed to promote successful completion of goals
- Ensure that the outside instructor is following the PSPE requirements of 400 minutes every two weeks of direct instruction and 500 minutes every two weeks of practice time
- Verify and sign PSPE student's recording of daily time logs
- Consult with PSPE's outside instructor/supervising credential teacher/site administrator/counselor as needed
- Acknowledge that the District does not investigate the site of the activities of any program to assess for potential for injury and that parent has signed the "Release of Liability" form
- Understand that should student fail to meet the attendance requirements and student goals, or if he/she leaves the program for any reason without immediately notifying the PSPE administrator, the student may not meet the physical education requirement, a "Fail" grade could result and no credit be granted

### **SUPERVISING CREDENTIALLED TEACHER REQUIREMENTS**

- Review the PSPE student's individual performance goals and accompanying learning activities at the beginning of the grading period. Verify that student and outside instructor have included at least one of the eight statutory content areas.
- Meet with PSPE student to review daily time logs and goals progress once every three weeks.
  - Verify the 400 minutes of direct instruction every two weeks in at least one or more of the state required content areas, and the additional 500 minutes of practice, skill-building and performance/competition every two weeks.
  - Verify PSPE student's progress towards goal completion and passing the class as well as appropriateness of learning activities in goal accomplishment.
  - Complete mid-term electronic progress report if necessary.
- Maintain a file folder for PSPE student to record the regular student-teacher conferences and parent contract as needed
- Consult with PSPE's parent/counselor/administrator as needed
- One week before end of grading period meet with PSPE student to review the daily time logs, student self-evaluation and outside instructor's summary of progress
- Complete the grade evaluation on the contract and submit to site administrator for legal compliance
- Complete the electronic grading sheet and submit according to site schedule

### **SITE ADMINISTRATOR REQUIREMENTS**

- Review entire PSPE application for completion and determine approval or denial of Private Study Physical Education

- Select a supervising credentialed teacher to generally supervise and evaluate the work of the PSPE student (recommend PE department chair)
- Maintain a file folder for each student to include the PSPE application, signed contract, other signed documents, student daily time logs, self-evaluation, outside instructor and supervising teacher evaluation
- Follow through with mid-term progress reporting and end-of-grading period evaluation process to ensure student has completed the self-evaluation and time daily time logs
- Follow through to verify that outside instructor has helped student maintain accurate time logs, completed evaluation of student progress, provided appropriate amount of statutory physical activity time and the additional 500 minutes of PSPE time in one or more of the required state content areas
- Follow through to verify that supervising credentialed teacher has regularly met with PSPE student to review progress of course requirements.
- Follow through to verify that supervising credentialed teacher has completed electronic progress reporting and grading and has submitted according to site schedule



# ORANGE UNIFIED SCHOOL DISTRICT

## PRIVATE STUDY PHYSICAL EDUCATION (PSPE)

### CONTRACT

SCHOOL:			STUDENT I.D.#:		
STUDENT LAST NAME:		FIRST NAME:		MIDDLE NAME:	
ADDRESS (STREET):		CITY/ZIP:		BIRTHDATE:	
AGE:		BEGINNING DATE OF CONTRACT:		TELEPHONE: (WITH AREA CODE) ( )	
GRADE:		ENDING DATE OF CONTRACT:			
DURATION (CIRCLE ONE) TRIMESTER 1/SEMESTER 1 TRIMESTER 2/SEMESTER 2 TRIMESTER 3		DATE DUE:		PLEASE RETURN TO:	

#### UNIT PLAN FOR THIS AGREEMENT

**LEVEL OF ACTIVITY:** \_\_\_\_\_  
(State, Regional (Multi-State), National, International)

**GENERAL OBJECTIVES:** Attach Student Goals and Student Learning Activities.

**LOCATION/PLACE OF TRAININGS/COMPETITIONS:** \_\_\_\_\_

#### PHYSICAL EDUCATION MODEL CONTENT STANDARDS FOR CALIFORNIA PUBLIC SCHOOLS

Check related instruction:

<input type="checkbox"/> Effects of physical activity upon dynamic health	<input type="checkbox"/> Mechanics of body movement
<input type="checkbox"/> Aquatics	<input type="checkbox"/> Gymnastics and tumbling
<input type="checkbox"/> Individual and dual sports	<input type="checkbox"/> Rhythms and dance
<input type="checkbox"/> Team sports	<input type="checkbox"/> Combatives

#### AGREEMENT

We have read this agreement and hereby agree to all the conditions set forth within and to assist the student in meeting the above time and work requirements.

**SIGNATURES REQUIRED** (5 signatures required)

STUDENT: _____	DATE: _____
PARENT/GUARDIAN/CAREGIVER: _____	DATE: _____
OUTSIDE INSTRUCTOR: _____	DATE: _____
SUPERVISING CREDENTIALLED TEACHER: _____	DATE: _____
ADMINISTRATOR: _____	DATE: _____

#### CERTIFICATION (Completed by Teacher)

EVALUATION METHOD:		
<input type="checkbox"/> Demonstration of skills	<input type="checkbox"/> Assignments completed	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Oral presentation	<input type="checkbox"/> Written exams	
EVALUATION/GRADE: <input type="checkbox"/> Pass <input type="checkbox"/> Fail	Comment: _____	

#### AGREEMENT STATUS REPORT

DATE BEGAN: _____	DATE COMPLETED: _____	CREDIT ATTEMPTED: _____	CREDIT COMPLETED: _____
		(If Applicable)	
DAYS OF ASSIGNED WORK: _____	DAYS OF COMPLETED WORK: _____	DAYS OF NON-COMPLETED WORK: _____	
ADMINISTRATOR/DESIGNEE SIGNATURE: _____		DATE: _____	







**ORANGE UNIFIED SCHOOL DISTRICT  
PRIVATE STUDY PHYSICAL EDUCATION (PSPE)**

Name: _____
Student ID: _____
Trimester/Semester 1, 2, 3 (circle one)
Date: _____

**STUDENT LEARNING ACTIVITIES**

<b><u>LEARNING ACTIVITIES</u></b>
<p><b>Describe the learning activities you plan to achieve for this goal during the time of the contract. Include how it will be measured and how you will show evidence. (Attach additional pages if necessary)</b></p>

**Note:** For one PSPE course, the student must have 400 hours every two weeks of direct supervised instruction in at least one of the eight state required content areas: Effects of physical activity upon dynamic health; mechanics of body movement; aquatics; gymnastics and tumbling; individual and dual sports; rhythms and dance; team sports; combatives. (Consult with your outside instructor how he/she will incorporate the state required content.) Students must also have an additional 500 minutes every two weeks of supervised practice, skill building, competition, performance.





**ORANGE UNIFIED SCHOOL DISTRICT**  
**PRIVATE STUDY PHYSICAL EDUCATION (PSPE)**

**OUTSIDE INSTRUCTOR'S QUALIFICATIONS**  
(To be completed by the outside activity instructor)

Trained specialist under whom activity is performed:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Business Address: \_\_\_\_\_  
(City) (State) (Zip)

Telephone: \_\_\_\_\_ Hours Available: \_\_\_\_\_

Organization with which activity is affiliated: \_\_\_\_\_

1. Describe the training which prepared you to supervise this activity.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Describe your experience supervising students in this activity.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. In what current position are you employed which qualifies you to train/supervise this student?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE ATTACH A COPY OF THE FOLLOWING:**

- Resumé or vitae
- Proof of certification by state or national coaching organization
- Proof of up-to-date First Aid/CPR certification
- Proof of concussion training

**IMPORTANT:** The trained outside instructor/coach who submits proof of First Aid/CPR certification and concussion training must be in attendance during **ALL** student rehearsals and activities.



**ORANGE UNIFIED SCHOOL DISTRICT**  
**PRIVATE STUDY PHYSICAL EDUCATION (PSPE)**

**OUTSIDE 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 PSPE activities must be performed by an outside instructor/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, the instructor will submit a written description about the experience, background, and qualifications to be an instructor at this level. Please use the attachment and include a resumé, proof of certification by state or national coaching organization, proof of up-to-date First Aid/CPR certification, and proof of concussion training.

I understand the concept of the Private Study Physical Education (PSPE) program and accept the responsibility as \_\_\_\_\_ outside instructor.  
(Student's name)

I understand the requirements associated with the request to provide PSPE to students in the Orange Unified School District in the conduct of this program. We agree to assume all responsibility for \_\_\_\_\_.  
(Student's name)

I will personally provide direct instruction for the student for a minimum of 400 minutes every two weeks and supervise an additional 500 minutes every two weeks of practice, skill building, competition, or performance. In addition, I will sign the student's time logs, as well as PERSONALLY write and sign the 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 PSPE program or your athlete, please contact the PSPE Coordinator at the athlete's school site.

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

\_\_\_\_\_  
Agency/Outside Instructor/Coach Name (please print)

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Agency/Outside Instructor/Coach Signature



**ORANGE UNIFIED SCHOOL DISTRICT  
PRIVATE STUDY PHYSICAL EDUCATION (PSPE)**

Name: \_\_\_\_\_  
 Student ID: \_\_\_\_\_  
 Trimester/Semester 1, 2, 3 (circle one)  
 Date: \_\_\_\_\_

**DAILY TIME LOG  
SUPPLEMENTAL ATTENDANCE AND PERFORMANCE RECORD**

DATE	ACTIVITY	GOAL	TIME Begin-End	HOURS
			<b>Total Hours:</b>	

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

**Date Due:** \_\_\_\_\_ **Outside Instructor Name:** \_\_\_\_\_  
 (Please Print)

**Outside Instructor:** \_\_\_\_\_  
 Signature

**Student Name:** \_\_\_\_\_  
 (Please Print)

**Parent Name:** \_\_\_\_\_  
 (Please Print)

**Student Signature:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_



# ORANGE UNIFIED SCHOOL DISTRICT

## PRIVATE STUDY PHYSICAL EDUCATION (PSPE)

### HOLD HARMLESS AND INDEMNIFICATION AGREEMENT (AGENCY / INSTRUCTOR / COACH)

\_\_\_\_\_ is an independent contractor and referred to as Consultant throughout this agreement, and will perform said services as an independent contractor and not as an employee of the District. Accordingly, nothing in this Agreement shall be construed as establishing a relationship of employer and employee, or principal and agent, between the District and the Consultant or between the District and any of Consultant's agents or employees. Consultant is solely responsible for its own acts and the acts of any of its agents or employees as they relate to any services provided. Consultant and its agents and employees shall not be entitled to any rights and or privileges of the District's employees and shall not be considered in any way to be the employees of the District. Each party acknowledges that the Consultant is not an employee for state or federal tax purposes or any other purpose.

\_\_\_\_\_ agrees to and shall hold harmless and indemnify the Orange Unified School District, its officers, agents, employees, and volunteers from every claim or demand made and every liability or loss, damage, or expense of any nature whatsoever, under Independent Study Physical Education Program which may be incurred by reason of:

- (a) Liability for damages for death or bodily injury to person, injury to property, or any other loss, damage or expense sustained by the Consultant or any person, firm or corporation employed by the Consultant upon or in connection with the services called for in this Agreement.
- (b) Any injury to or death of persons, or damage to property, sustained by any persons, firm or corporation, including the District, arising out of, or in any way connected with the services covered by this Agreement.

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

\_\_\_\_\_  
Agency/Instructor/Coach's Name (please print)

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



# ORANGE UNIFIED SCHOOL DISTRICT

## PRIVATE STUDY PHYSICAL EDUCATION (PSPE)

### PARENT RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

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 the Private Study Physical Education (PSPE) program. This release essentially says the student named below is going to participate in an Private 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 Orange Unified 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 participate in an \_\_\_\_\_  
(Name of Student)

Private 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 known and unknown, where serious accidents can  
(Name of Activity)

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 Private 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 Private Study Physical Education program, including any transportation to or from any such program.

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

In consideration for Orange Unified School District allowing the above-named student to participate in this Private Study Physical Education program, we voluntarily agree to release, waive, discharge, and hold harmless Orange Unified 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 Orange Unified 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 Private 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 Orange Unified 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 PRIVATE 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.

School Year: \_\_\_\_\_

(check one)

\_\_\_\_ Trimester 1/Semester 1  
\_\_\_\_ Trimester 2/Semester 2  
\_\_\_\_ Trimester 3

Beginning Date: \_\_\_\_\_  
Beginning Date: \_\_\_\_\_  
Beginning Date: \_\_\_\_\_

Ending Date: \_\_\_\_\_  
Ending Date: \_\_\_\_\_  
Ending Date: \_\_\_\_\_

Student/Participant Name: \_\_\_\_\_  
(Please Print)

Parent/Guardian Name: \_\_\_\_\_  
(Please Print)

Student/Participant Signature \_\_\_\_\_  
Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_  
Date \_\_\_\_\_