



2024 - 2025

Information Packet for Off-Campus Physical Activity Substitutions for Middle School or High School Students

PURPOSE

The purpose of the Off-Campus Physical Activity (OCPA) program offered by Rockwall Independent School District (RISD) is to accommodate students in 7th -12th grades who are making a serious effort to develop high level capabilities and to allow them to be involved in an off-campus program that provides training exceeding that offered in the school district.

PROGRAM DESCRIPTION

The OCPA program is a cooperative arrangement between the RISD and an approved off-campus sponsoring facility/provider. Activities are defined as those in which a student works either with a single teacher/coach or with a team teacher/coach at an approved provider during the regular school year.

GENERAL REQUIREMENTS

1. Students in grades seven (7) through twelve (12) will be eligible for consideration for the off-campus program. No students in elementary or intermediate school will be considered for the off-campus program.
2. Students will receive a maximum of one-half (.5) credit per semester. (Confirm with your school counselor regarding PE credit requirements.)
3. A student may not participate in the OCPA program if the sport is offered as part of the RISD curriculum unless the student is released from or not placed on a team as part of the school program.
4. Students applying for OCPA will be considered under two categories:
 - **Category I** - This program requires a minimum of **fifteen (15) hours** per week of highly intense, professionally supervised training. Students qualifying at this level may be dismissed from school one period per day for such participation. The student will be required to follow this schedule for the entire semester.
 - **Category II** - This program is to be of high quality, well supervised by appropriately trained instructors, and consisting of a minimum of **five (5) hours** per week. Students participating at this level MAY NOT be dismissed from any part of the regular school day.

OCPA COURSE REQUIREMENTS

1. Documentation (ACTIVITY LOG SHEET) of attendance and grades for OCPA activity must be submitted by stated deadlines. The student should complete this and the OCPA Provider (coach/trainer) will sign at the top of the form. The Activity Log Sheet is located on the website and in the OCPA Packet.
2. Documentation (GRADER REPORT FORM) must also be submitted by stated deadlines. Providers are responsible for assigning a PASS/FAIL grade and signing the form. Students must also sign the Grade Report Form.
3. Students are responsible for turning in all documentation to the Rockwall OCPA Coordinator.
4. **If a student fails to meet program requirements, (i.e. documentation on logs, turning logs and grade sheets in by due date), the student may lose the option of participating in OCPA.**

APPROVED ACTIVITIES (Providers)

1. Providers must be approved by the Rockwall ISD OCPA Coordinators.
2. The list of board approved providers and additional information can be found on the Rockwall OCPA website.

FREQUENTLY ASKED QUESTIONS

Q What are the approved activities available for Off-Campus PA?

A Please see the list of approved activities/providers on the Rockwall OCPA website.

Q Why is there a fee for OCPA?

A This program is optional to students in Rockwall ISD and the fee is to offset the cost associated with administering the program.

Q Can an elementary or intermediate student be enrolled in OCPA?

A No, the program is only open to students in grades 7 – 12.

Q Who changes the student's schedule to reflect OCPA?

A After the application is approved by the OCPA Coordinator and the payment received, the counselor at the student's home campus will change his/her schedule, providing they can create a schedule to accommodate the request to reflect OCPA.

Q Is travel time included as part of the time requirement?

A No, the student should not include travel time as part of the time requirement. Also, if a student works at the facility he/she may not count work hours towards the time requirement.

Q Can the student include tournament play/competitions as part of the time requirement?

A No more than 6 hours of tournaments/competitions per week may be included in the time requirements for Category ONE – 15 hours/week.

Q May the student enroll in the OCPA program for part of the semester?

A Participation must run concurrent with the school semester and continue throughout the entire semester. Students may enroll in Fall or Spring semester only.

Q Can the student have more than ONE Provider/Activity?

A No, only 1 Provider/Activity may be selected for OCPA. Credit will not be given for a combination of hours for 2 separate activities.

APPLICATION PROCEDURE

- Student prints an application form, provider form, provider/student form, and release form from the OCPA packet or from the website.
- Upon completion, appropriate **FORMS** are emailed to **Janice Perez Longino** at janice.longino@rockwallisd.org. **FEES** must be paid online through Rev Trak. **Both forms and payment must be completed before being enrolled in OCPA.** <https://rockwall-isd.revtrak.net/off-campus-pe/#/list> .
- After the forms are reviewed and the fee is received, approved applicants will receive a confirmation email. At that time, Counselors will be notified and will put OCPA on the student's schedule.
- First semester application/fee must be received by **August 1, 2024** and second semester application/fee must be received **by January 3, 2025. No applications will be approved after these dates.**
- **A Student's schedule will be updated and completed only when the application and fee are submitted.**
- **A new application must be submitted each school year.**
- Once approved the student must sign in/out with the Attendance Office if leaving campus for OCPA.

FEES:

An enrollment fee will be assessed for all students participating in OCPA program. Payment can be made with a single payment of \$150.00 for the entire school year.

All payments must be made through Rev-Trak online. Fees must be received before a student can be enrolled in OCPA. Refunds will not be processed after October 14, 2024 (Fall semester) or March 14, 2025 (Spring semester).

For questions you may contact:

Janice Perez Longino
District Lead for Physical Education and Health
1050 Williams Street
Rockwall, TX. 75087
(469) 698-7413
janice.longino@rockwallisd.org

RISD Off-Campus Physical Activity Student Application

2024 - 2025 Campus:	RHS <input type="checkbox"/>	RHHS <input type="checkbox"/>	WMS <input type="checkbox"/>	UMS <input type="checkbox"/>	CMS <input type="checkbox"/>	
2024 - 2025 Grade:	12th <input type="checkbox"/>	11th <input type="checkbox"/>	10th <input type="checkbox"/>	9th <input type="checkbox"/>	8th <input type="checkbox"/>	7th <input type="checkbox"/>

Counselor's name: _____

This application is for (check one): both semesters 1st semester only 2nd semester only

This application is to be completed by the parent or guardian. Please provide **all** information requested.

Student's Full Legal Name (Please Print): _____
FIRST
MIDDLE
LAST NAME

Type of OCPA is: _____ PROVIDER Organization is: _____

I understand that this activity will be considered: (choose only one)

Category I (15 hours/week) Category II (5 hours/week)

The name of the trainer/coach is _____ and the training will take place at _____ training facility.

I am requesting my student be released from _____ period (ONLY Category 1)

I understand that Activity Logs and Grade Reports must be received by the specified due date or my student may receive an Incomplete or Failing Grade and may lose the opportunity to participate in OCPA.

I understand that I am responsible for transportation to and from the physical activity program and that the school district is not responsible for any contractual agreements with the trainer or coach.

I understand that my student **MUST** have a current Permission and Release form on file.

I understand that the OCPA fee must be paid before my student can be enrolled in OCPA.

For office use only:

Provider approved: _____ If no, paperwork sent: _____

Student Application: _____

Provider Agreement: _____ Category 1 Doc.: _____

Student Permission to Release: _____

Parent contacted: _____ Date: _____

Payment received: _____ Date: _____

Parent Signature

Student Signature

Parent Contact Phone Number

Parent E-mail address



Rockwall Independent School District

1050 Williams Street

Rockwall, TX 75087

Phone 972.772.0605

<http://rockwallisd.org>

RISD PROVIDER AND STUDENT AGREEMENT

2024 - 2025

To Whom It May Concern:

This letter is to inform you that _____
(print student's full legal name: First, Middle, Last)

has submitted an application to receive Off-Campus Physical Activity credit through your program. In order for this student to qualify for this program through the District, you must agree to the parameters set forth by the Rockwall Independent School District.

Provider's Name: _____

Provider's Facility address: _____

Provider Coordinator's E-mail address: _____

Provider Phone number: _____

As a provider of Off-Campus P.A. you must comply with the parameters identified below.

Please place a checkmark (✓) in each box below to indicate acknowledgement.

- I agree to structure my teaching in a manner that fulfills the guidelines as developed in the Texas Education Knowledge and Skills (TEKS) curriculum.
- I will confirm, with my signature, practice activities and dates fulfilled by the student.
- I also am aware that it is the provider's responsibility to complete and sign all Activity Logs and Grade Reports and email them to janice.longino@rockwallisd.org at each grading period.
- I agree to the training hours outline in this packet and should they change, I will contact Janice Longino immediately.

The OCPA Agency Coordinator must complete the following schedule for the student to verify at least 15 hours of required participation for Category I or at least 5 hours of required participation for Category II. Games and Contests my not count for participation in Category II.

Day	Physical Address of Training/Participation	Number of hours of participation
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		
Total Hours of Participation:		

This student qualifies for: (check one) _____ Category I _____ Category II

Category I Only

Student and agency must supply one of the following for students participating in Category I.
Attach a photocopy to this form.

- This student’s entry form or award for Olympic or regional/national participation and/or competition.
- A publication which verifies this student’s Olympic or regional/national athletic status, rank, or participation.
- This student’s Olympic or regional/national athletic certification, which verifies his/her status, rank, or participation.
- A written coach’s statement that describes this student’s performance level.

I, _____, understand Rockwall Independent School
(please print your full legal name on line above)

District’s expectations for the Off-Campus Physical Activity Substitution Program. I also understand my responsibility as a supervisor/coach.

Provider’s Signature _____ Date _____

Please email form to:
Janice Perez Longino
janice.longino@rockwallisd.org

Student Agency Page 2 of 2

Completed forms must be returned to Janice Longino on or before August 1, 2025 and on or before the first day of spring semester.

No exceptions for late or incomplete applications will be allowed.

**ROCKWALL ISD
PERMISSION AND RELEASE**

I understand that my child, _____, a student at Rockwall Independent School District (“District”), is receiving physical education credit for participation in the “activities” otherwise unrelated to the District and off District premises. I understand that my child’s participation in these physical activities is wholly voluntary and the District does not require my child to participate in these types of physical activities. I understand that the District provides opportunities for physical education credit at the District, but I choose to allow my child to participate in an outside physical activity instead of participating in District run physical education.

I understand that my child must comply with the Rockwall ISD Student Code of Conduct and any rules and standards of conduct at his/her physical activity location. I understand that my child’s failure to adhere to these rules and standards of conduct may result in discipline in accordance with the Student Code of Conduct and my child’s dismissal from the physical activity. I understand that the District has no control over the operations or premises of my child’s particular activity. I further understand that my child will not be under the supervision of a District employee but will be under the supervision of a representative of the assigned activity while participating in the activity.

I recognize and understand that there are certain dangers and risks to which my child may be exposed by participating in the activity, including risk of physical injury. I understand that the District does not have medical personnel available at the activity locations. I want my child to participate in the activity despite the possible dangers and risks and despite this release. I understand that the District assumes no responsibility for any injury, damage, or cost which might arise out of or in connection with the activity. I therefore agree to assume all of the risks and responsibilities that are in any way associated with the activity.

I give permission for my child to obtain his/her own transportation to his/her activity location, whether by driving his/her personal vehicle, driving a vehicle owned by me and/or my spouse, driving a private vehicle provided by a third party, or by riding in a private vehicle driven by a third party (together referred to as “personal transportation”). I agree that I am not entitled to any reimbursement for mileage or transportation costs from the District in transporting my child to the physical activity.

In consideration of the privilege of participating in the activity and the convenience of utilizing personal transportation, the receipt and sufficiency of which is hereby acknowledged, I, by my signature affixed below, individually and by next friend of the above named child, acting for myself, my minor child, my agents, heirs, beneficiaries, trustees, executors, successors, assigns, administrators, attorneys and legal representatives, do hereby **RELEASE, ACQUIT AND FOREVER DISCHARGE** the District, all of its employees, agents, trustees, volunteers, attorneys, and legal representatives, in their representative, official, and individual capacities, of and from any and all charges, complaints, grievances, claims, demands, causes of action, damages, loss, or expense, of whatsoever kind or character, in tort (**INCLUDING NEGLIGENCE OR NEGLIGENT OMISSION**), or in contract, that are created by or arise under state and/or federal statutes, constitutions, and/or the common law, whether known or unknown, which may in any manner arise from or relate to the activity or the use of personal transportation. I hereby waive my rights to institute any action, claim or suit against and/or recover compensation, benefits, or damages from the District and/or the above-described persons and entities, and covenant and agree not to sue any such persons or entities regarding such claims in any court or tribunal and not file or aid in the institution or prosecution of any action, lawsuit, or cause of action (whether or not by direct action, counterclaim, cross-claim, or interpleader) regarding any claim released herein.

My signature below indicates my understanding of this permission and release and indicates my permission for my child to participate fully in the physical activity. I have carefully read this permission and release before signing it. No representations, statements, or inducements, oral or written, apart from the foregoing written statement, have been made. This agreement shall become effective only upon receipt by the District and shall be governed by the laws of the state of Texas.

Signed on this _____ day of _____, 2024 - 2025
(Month)

Printed name of parent or legal guardian

Preferred Phone

Signature of parent or legal guardian

Parent Email Address

Students Name

Provider

OFF-CAMPUS PHYSICAL EDUCATION
IMPORTANT DATES

September 6, 2024	Activity logs due
October 4, 2024	Grades and activity logs are due
November 8, 2024	Activity logs due
December 20, 2024	Grades and activity logs are due
February 7, 2025	Activity logs due
March 14, 2025	Grades and activity logs are due
April 18, 2025	Activity logs due
May 21, 2025	Grades and activity logs are due

Submit the following forms to Janice Perez Longino

1. RISD Off-Campus Physical Activity Student Application
2. RISD Provider/Student Form
3. RISD Permission and Release Form
4. RISD Off-Campus Physical Activity Log Form
5. RISD Off-Campus Physical Activity Grade Report Form

Submit the following form to Larry Sherman

1. Provider Application

Janice Perez Longino
District Lead for Physical Education and Health
1050 Williams Street
Rockwall, Texas 75087
(469) 698-7413
janice.longino@rockwallisd.org

Larry Sherman
OCA Provider Contact
1050 Williams Street
Rockwall, Texas 75087

larry.sherman@rockwallisd.org

Campus OCPA Coordinators

OCPA Coordinator for Rockwall High School – Quincy Williams / quincy.williams@rockwallisd.org

OCPA Coordinator for Rockwall – Heath High School – Brad Waters / bradley.waters@rockwallisd.org

OCPA Coordinator for Cain Middle School – Brittany Pike / brittany.pike@rockwallisd.org

OCPA Coordinator for Williams Middle School – Mike Mann / mike.mann@rockwallisd.org

OCPA Coordinator for Utley Middle School – Blake Spivey / blake.spivey@rockwallisd.org

OCPA

Required Paperwork Forms

Student Application

Provider/Student Agreement

Permission Release Form

***Blank Activity Log Sheets**

Please make extra copies for the year.
Students must submit paperwork by due dates to
receive credit for semester.

***Blank Grading Forms**

Please make extra copies for the year.
Students must submit paperwork by due dates to
receive credit for semester.

*** RISD Provider Application Form**

ACTIVITY LOG SHEET

Please put the date and specific time for everyday of activity. Provider must sign Activity Log for student to receive credit.

Student's Name (please print)

Campus

Grading Period Dates

Activity Site

Provider (please print)

Provider's Signature

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Weekly Hours
<input type="checkbox"/> Start Time: End Time:	<input type="checkbox"/> Start Time: End Time:	<input type="checkbox"/> Start Time: End Time:	<input type="checkbox"/> Start Time: End Time:	<input type="checkbox"/> Start Time: End Time:	<input type="checkbox"/> Start Time: End Time:	<input type="checkbox"/> Start Time: End Time:	
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RISD Off-Campus Physical Activity Grade Report Form

Student's Name (please print)

Campus

Activity Site

Below are the dates that Grade Reporting Forms are due to the school campus. Forms **MUST** be received no later than 4:00 PM on the dates specified below. Remember to check the appropriate grading period as follows and indicate "P" or "F" for Pass or Fail. **BOTH STUDENT AND PROVIDER MUST SIGN FORM.**

GRADING PERIOD

(Please check one)

- 1st Grading Period
- 2nd Grading Period
- 3rd Grading Period
- 4th Grading Period

* DATE FORMS DUE TO:

Janice Perez Longino

October 4, 2024

December 20, 2024

March 14, 2025

May 21, 2025

* Dates listed on the Grade Reporting form coincide with school calendar

Activity Grade

(P/F) pass/fail

Provider's Name (please print)

Date

Provider's Signature

Student Signature

Return form to Janice Perez Longino

email: janice.longino@rockwallisd.org

Mailing Address:

Rockwall ISD Administration Center
1050 Williams St., Rockwall, TX 75087
(469) 698-7413



Rockwall Independent School District
1050 Williams Street
Rockwall, TX 75087
Phone (972) 771-0605
larry.sherman@rockwallisd.org

RISD PROVIDER APPLICATION 2024 - 2025
Must be completed each year and approved by RISD

Agency's Name: _____

Agency's Coordinator: _____ Telephone: _____

Agency's Coordinator's Email Address: _____

Physical Address of Training Facility (where students will participate): _____

Physical address for alternative site for inclement weather, if applicable: _____

What criterion was used to certify instructors? _____

What are the agency's program goals? (May be attached) _____

Describe a typical training session. (May be attached) _____

Describe how a student will be graded. (May be attached) _____

Completed form must be EMAILED to **Larry Sherman** on or before August 1st or on or before the first day of
spring semester – larry.sherman@rockwallisd.org
No exceptions for late or incomplete applications will be allowed.

For Provider

Guidelines for Trainers and Coaches of Students applying for Physical Activities Programs for P.E. Substitute Credit

(Please give to Provider)

For a student to receive P.E. substitute credit for participating in your training program the following must be submitted to

1. A completed and signed Provider Application. – Larry Sherman
larry.sherman@rockwallisd.org
2. A signed Provider/Student Agreement accepting responsibility for the training hours and grading procedure. – Janice Longino – janice.longino@rockwallisd.org
3. A grade report (Pass/Fail) for each grading period.
 - If the grade is not reported, the student will be given an “I” for incomplete work until the grade report is submitted.
 - If the grade is not reported in a timely manner, the student may be denied the opportunity to participate in the OCPA program. – janice.longino@rockwallisd.org
4. An activity log– Janice Perez Longino – janice.longino@rockwallisd.org
 - Time, location, length of training,
 - Absences, and
 - Signature of student and trainer or coach.

For further information, please contact Janice Perez Longino.

Janice Perez Longino

District Lead for Physical Education and Health

1050 Williams Street

Rockwall, Texas 75087

(469) 698-7413

**TEKS for Physical Education:
(FOR PROVIDER)**

§116.64. Skill-Based Lifetime Activities: (One Full Year Credit).

§116.64.c.1 - Movement patterns and movement skills.

The physically literate student applies movement skills while participating in a minimum of five lifelong activities, including one from each of the following categories: target, striking and fielding, fitness, rhythmic, and innovative games and activities with international significance. The student is expected to:

- (A) exhibit a level of competency in one or more target activities such as archery, disc golf, backyard target games, bowling, and golf;
- (B) exhibit a level of competency in one or more striking and fielding activities such as kickball, softball, baseball, and racquet sports;
- (C) exhibit a level of competency in one or more fitness activities that promote cardiorespiratory endurance, muscular strength, muscular endurance, and flexibility.

§116.64.c.2 – Performance Strategies

The physically literate student applies tactics and strategies to be successful in skill-based lifetime activities. The student is expected to:

- (A) perform skills and strategies consistently;
- (B) modify movement during performance using appropriate internal and external feedback;
- (C) describe appropriate practice procedures to improve skill and strategy in a sport;
- (D) identify the critical elements for successful performance;
- (E) demonstrate proper officiating techniques, including hand signals, verbal communication, and application of rules, to ensure safe participation in activities;
- (F) keep score accurately during games or activities.

§116.64.c.3 - Health, Physical Activity, and Fitness.

The physically literate student applies knowledge of health and fitness principles to participation in skill-based lifetime activities. The student is expected to:

- (A) establish realistic and challenging health-related fitness goals for selected skill-based lifetime activities;
- (B) apply appropriate safety procedures to prevent or reduce injuries in skill-based lifetime activities;
- (C) analyze health and fitness benefits derived from participating in skill-based lifetime activities.

TEKS for Physical Education:

(FOR PROVIDER)

§116.64.c.4 – Social and Emotional Health

The physically literate student applies principles for social and emotional health to participation in selected skill-based lifetime activities. The student is expected to:

- (A) acknowledge good play from an opponent during competition;
- (B) explain the importance of accepting the roles and decisions of officials;
- (C) explain the importance of accepting successes and performance limitations of self and others;
- (D) discuss the importance of accepting personal responsibility to create and maintain a physically and emotionally safe and nonthreatening environment while officiating;
- (E) discuss and apply ways to respond to challenges, successes, and failures in physical activities in socially appropriate ways.

§116.64.c.5 – Lifetime Wellness

Lifetime wellness. The physically literate student applies wellness principles to participation in selected skill-based lifetime activities. The student is expected to:

- (A) select and participate in at least one skill-based lifetime activity that provides for enjoyment and challenge from each category, including target, striking and fielding, fitness, rhythmic, and innovative games and activities with international significance;
- (B) describe how sleep is essential to optimal performance and recovery.

Source: The provisions of this §116.64 adopted to be effective August 2023