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## Off-campus Physical Activity Programs Approval Request

revised June 2018

| Part 1:  |  |                        |       |
|--|--|------------------------|-------|
| Date of submission:  |  |                        |       |
| Name of applying district or charter school:   |  |                        |       |
| County District Number:  |  |                        |       |
| School year approval will become effective:  |  |                        |       |
| Contact person:  |  |                        |       |
| Contact person's email address:  |  |                        |       |
| Contact person's phone number:   |  |                        |       |
| Superintendent:  |  |                        |       |
| Part 2:  |  |                        |       |
| Approval of the physical activity programs may be granted to school districts or commissioner of education under the following conditions.   | charter scho   | ools by the            |       |
| The board of trustees of the local school district or charter school has approved a private or commercially-sponsored physical activity programs in either Category I, substitution for high school physical education courses in accordance with Texas E §28.025(b-10) and 19 Texas Administrative Code (TAC), Chapter 74, Subchapter I | Category II, on the Control of Co | or both as a de (TEC), | ents. |
| Our district or charter school is applying for Category I only Category II only Categories I and II  |  |                        |       |
| Category I: Olympic-level participation and/or competition must meet all of the critical   | eria below.  |                        |       |
| Please indicate your district or charter school's compliance with an "x" in the box.   |  |                        | ĺ     |
| Category I Substitutions   | Yes  | No                     |       |
| Students are supervised a minimum of 15 hours per week with highly intensive professional training.  |  |                        |       |
| The training facility, instructors, and the activities involved in the program are certified by the superintendent to be of exceptional quality.   |  |                        |       |
| Program requires students to engage in moderate to vigorous physical activity.   |  |                        |       |
| Students qualifying and participating at this level are dismissed from school no more than one class period per day.   |  |                        |       |
| Students do not miss any class other than physical education.  |  |                        |       |

Indicate in the table below the Category I programs approved in your district or charter school. You may add rows as needed.

| Entity Providing Service | Off-campus Program | Accountability/Evaluation<br>Procedures |
|--------------------------|--------------------|---|
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**Category II:** Private or commercially-sponsored physical activities that are not Olympic level but are certified by the superintendent to be of high quality must meet all of the criteria below.

Please indicate your district or charter school's compliance with an "x" in the box.

| Category II Substitutions  |  | No |  |
|--|--|----|--|
| Students are well supervised at least 5 hours per week by appropriately trained instructors. |  |    |  |
| Programs are certified by the superintendent to be of high quality.                          |  |    |  |
| Program requires students to engage in moderate to vigorous physical activity.               |  |    |  |
| Students who participate at this level are not dismissed from any part of the school day.    |  |    |  |

Indicate in the table below the Category II programs approved in your district or charter school. You may add rows as needed.

| Agency Providing Service | Off-campus Program | Accountability/Evaluation Procedures |
|--------------------------|--------------------|--------------------------------------|
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