

Extended Studies

PE Options

PE Options is available to students currently enrolled full time in a Washoe County School District (WCSD) School. WCSD high school students are permitted to earn physical education credit by participating in instructor-led group classes at an approved fitness facility as predetermined by Extended Studies. The approved fitness facility list is available at <https://www.washoeschools.net/Page/1145>

Please refer to the PE Options Statement of Understanding on the following page for the requirements of this course.

Registration

Registration is to be completed at the beginning of the desired semester either email, in the office, or by mail. Students must register and pay the \$75.00 registration fee for every .5 credit.

1. To pay for the course by email, in the office or by mail:
 - I. Print and complete the registration form and the PE Options Statement of Understanding in this packet.
 - II. Submit the registration form, PE Options Statement of Understanding and payment of \$75 check made payable to WCSD, or credit card (Visa, or MasterCard) to the Extended Studies Office at extendedstudies@washoeschools.net.

****Course hours do not count until the semester begins and registration documents/payment are received ****

Refund Policy

A 20% processing fee will be assessed on all refunds if cancellation is made within 1 week of registration. No refund will be given if cancellation is not made within 1 week of registration. All refunds are issued by check within 2-3 weeks of request.



Extended Studies

5450 Riggins Ct. Suite 5
Reno, NV 89502
Phone: 775-353-6990
Fax: 775-689-2573

<http://washoeschools.net/Page/1145>
extendedstudies@washoeschools.net

PE OPTIONS REGISTRATION FORM

PE Options Name of the Approved Facility: _____

Address of the Facility: _____

Student Last Name _____ First Name _____ Grade _____

Student ID _____ School _____ Counselor _____

Address _____
City _____ State _____ Zip Code _____

Parent Home Phone: _____

Parent Cell Phone _____ Parent Email _____

Student Cell Phone _____ Student Email _____

By signing below, I agree to ensure my student follows all program policies and deadlines as outlined in the Statement of Understanding.

Print Parent Name _____ Parent Signature _____ Date _____

Payment (check made payable to WCSD):

☐ Check Amount \$ _____ Check # _____

☐ Credit Card Amount \$ _____ Card # _____ Exp Date _____

_____ MasterCard _____ VISA

Name on Card _____

***A \$3 credit card processing fee applies**

****Course hours do not count until the semester begins and registration documents/payment are received ****

Please see course packet for refund information.

Staff only use TR _____ IC _____

PE Options Statement of Understanding

(This two page document is due to the Extended Studies Office as part of the registration.)

Student Last Name _____ First Name _____

Student ID _____

Student and parent must initial and acknowledge each statement below and sign and date page 2 of the PE Options Statement of Understanding.

_____ I understand 60 hours (3,600 minutes) of participation in a live instructor-led group class (the instructor may not be the student's parent or close relative) is required to earn a .5 credit in PE Options. The instructor must be certified and "live" in the class (video classes are not accepted). Classes under 1 hour may not be rounded up. For example, a 45 minute class does not count as 1 hour.

_____ I understand that the Attendance Card must be signed by the class instructor after every group class attended and the facility manager or supervisor whose signature is on file with Extended Studies must sign the Attendance Card monthly to verify the instructors' signatures.

_____ I understand that I must submit a class schedule with my Attendance Card with the classes attended circled and that a maximum of 2 hours of classes a day may be counted. If I attend 2 different classes, both instructors must sign the Attendance Card.

_____ I understand the completed Attendance Cards are due no later than 7 days after the end of the month. The final Attendance Card is due 2 weeks before the end of the semester. NOTE: During the Spring semester, senior hours are due 3 weeks before the end of the semester. Attendance Cards may be:

- Mailed or hand delivered to the Extended Studies Office at the address above;
- Emailed to extendedstudies@washoeschools.net; or
- Faxed to 775-689-2573.

_____ I understand that the 60 hours must be completed within the semester/summer that I am registered for in accordance with the WCSD Balanced Calendar.

_____ I understand that if I become injured and therefore am unable to continue with participation in PE Options for a period of time, I must contact Extended Studies to make appropriate arrangements. A doctor's note is required.

_____ I understand S/U grades are awarded for PE Options and do not affect my GPA.

_____ I understand the WCSD or Extended Studies is not liable or responsible for the student's payment of any fees associated with fitness facility membership.

_____ I understand there is absolutely no tolerance for abuse of the course and that any student who falsifies their participation in PE Options or forges a signature will earn an unsatisfactory grade (U) and no credit.

PE Options Statement of Understanding

- _____ I understand that students who drop this course after the 11th week during Fall and Spring semesters or the 4th week during Summer session will earn an Unsatisfactory (U). No record of the course will be posted to the student's transcript if course is dropped prior to the 11th week in Fall and Spring or the 4th week in Summer.
- _____ I understand that a 20% processing fee will be assessed on all refunds if cancellation is made within 1 week of registration. No refund will be given if cancellation is not made within 1 week of registration. All refunds are issued via check.
- _____ I understand that if I withdraw from a WCSD school, I am no longer eligible to take this class and it will be dropped with no credit issued.
- _____ I have read, understand, and agree to abide by all information contained in this packet.

Student Name

Student Signature

Date

Parent Name

Parent Signature

Date

PE OPTIONS ATTENDANCE CARD

A group class schedule from the gym **MUST** be attached monthly to this attendance card. The classes that the student attended **MUST** be circled and the begin and end times on the attendance card **MUST** coincide with the attached schedule. Students may count up to two (2) hours of instructor led group classes per day.

Student Last Name	Student First Name
Name of Fitness Facility	Student ID#

	DATE	DAY	BEGIN	END	TOTAL	INSTRUCTORS SIGNATURE
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

Gym Manager/Supervisor _____ Date _____

↑ Please note that this attendance card will not be accepted by Extended Studies if any required signatures are missing. There is absolutely no tolerance for abuse of the program. Any student who falsifies their participation in PE Options or forges a signature will earn a failing grade (U) and no credit.

Total # of Hours Submitted	Infinite Campus (Initial)	Date
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