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Class Website:

www.westlakehealthhandpe.weebly.com

(Bookmark this website!)

Course Description

"The goal of Health Education at the high-school level is to help establish patterns of behavior that will assist a person in achieving complete health. Complete health is accomplished by having a balance of physical, mental, social, emotional, and spiritual well-being. This course is designed to offer students the opportunity to acquire knowledge, incorporate processes and life skills, and develop positive attitudes about life. Development of a healthy body and a healthy mind will assist young people in living active, productive, and successful lives."

-Utah State Board of Education

I am responsible for... Delivering quality instruction, posting a calendar of important dates on the board, remediating frequently with students who need extra help, preparing you for tests, and keeping grades up to date.

You are responsible for... turning in assignments when they are due, taking proper notes in the unit packets so you can study for test, checking your grade on skyward frequently, getting to class on time, participating in class discussions, and preparing for tests.

"Wow, I really regret that workout." - said no one

Cheating

There is a ZERO tolerance policy for cheating! Any form of cheating WILL result in an F on the test, quiz, or assignment, as well as a referral to administration for further discipline.



Grading Scale

A 100-94% A- 93-90% B+ 89-87% B 86-84% B- 83-80% C+ 79-77% C 76-74% C- 73-70% D+ 69-67% D 66-64% D- 63-60% F 59-0%

Daily Journal & Writing Prompt

Students will receive 5pts each day for being on time and answering the writing prompt in the journal within 3 minutes of class starting. Journals will be collected periodically for grading. IT IS YOUR RESPONSIBIBLITY TO KEEP YOUR JOURNAL UP TO DATE!

Course Calendar

FIRST DAY OF SEMESTER INTRODUCTION

August 22/23: Intro to class/Syllabus

HEALTHY SELF

August 24/25: Healthy Self Concept

August 28/29: Communication

August 30/31: Healthy Relationships

September 1/5: Peer Pressure & Bullying,

September 6/7: Peer Pressure & Bullying,

September 8/11: Mental Illness

September 12/13: Resiliency/Suicide Prevention

September 14/15: Stress Management

September 18/19: Project Presentations

September 20/21: TEST

NUTRITION and FITNESS

September 22/25: Nutrition and Fitness Intro

September 26/27: Metabolism and Obesity

<u>September 28/29:</u> Energy Drinks/Nutrition Label

October 2/3: Components of Fitness

October 4/5: Eating Disorders & Body Image

October 6/9: Review

October 10/11: TEST

SAFETY/FIRST AID/DISEASES

October 12/13: Personal Safety/ Internet Safety

October 16/17: Basic First Aid

October 18/24: CPR

October 25/26: CPR

October 27/30: Communicable Diseases

October 31/Nov 1: Non-Communicable Diseases

November 2/3: TEST

SUBSTANCE PREVENTION

November 6/7: Substance Use in Teenagers

November 8/9: Teenage Drinking Brain

November 10/13: Tobacco and E-Cigs

November 14/15: Other Drugs

November 16/17: Advertisement/Media

November 20/21: TEST/Project Present

HUMAN REPRODUCTION

November 27-28: Dating Relationships

November 29/30: Overcoming the Pressure

December 1/4: Unhealthy Relationships

December 5/6: Reproductive Anatomy

December 7/8: Pregnancy and Labor

December 11/12: Sexually Transmitted Infections

December 13/14: Adoption Presentation

December 15/18: TEST

December 19/20: The High Cost of Free Love



Human Reproduction Material

As part of this course, a unit on human reproduction will be taught. This unit will begin when we return from Thanksgiving break. Utah law requires that parents give their consent before their child takes part in any aspect of the unit. You may opt your child out of any part of the unit or the entire unit. Simply mark your preference on the attached consent form and have your student return the form promptly.

The Alpine School District has a policy of teaching abstinence. Their policy includes these provisions:

- The advocacy of contraception will NOT be taught
- The advocacy of homosexuality will NOT be taught
- The advocacy of sexual relationships outside of marriage will NOT be taught
- The intricacies of sex will NOT be taught

This unit is taught VERY CONSERVATIVELY. My major objectives for the unit are to:

- Encourage students to discuss family standards and expectations with their parents
- Encourage students to follow healthy societal norms, specifically that abstinence is expected before marriage, and fidelity in marriage
- Resolve student concerns by answering their questions factually
- Empower students with the necessary knowledge to make healthy decisions

Before your child takes part in this unit, please speak with him/her and reaffirm your family values about this important issue. I am more than happy to provide you with resources to help you talk with your child. It is my intent and hope that the things your child will learn in my classroom will encourage him/her to follow your family's values.

If you have further questions, please contact me. I would be happy to go into further detail about what will be taught so you can make an informed decision about your child's participation. I would encourage you to visit with me and preview lesson plans if you have any concerns about this unit.

Human Reproduction Consent Form

Parents must receive this form no later than two weeks prior to the beginning of instruction.

Course: Health Education Teacher(s): Burrows, Champagne, Rushing, Seegmiller, Ward

School: Westlake High School Telephone: 801-610-8815

Dear Parent/Guardian:

As part of your child's education, he/she has enrolled in a course that includes instruction on topics related to human reproduction. You are receiving this consent form because instruction and/or discussion of human reproduction topics are controlled by state law and/or Utah State Board of Education rule. Please read the form carefully, select **one option**, sign, and return to the teacher identified above. Choose Option 1 if you want your child to continue with the class for this unit. Your student will not be allowed to participate in class activities without this completed and signed form on file. Thank you.

INFORMATION

All instruction related to human reproduction will take place within the context of Utah State Law (53A-13-101) and Utah State Board of Education rule (R277-474) as follows:

- The public schools will teach sexual abstinence before marriage and fidelity after marriage.
- There will be prior parental consent before teaching any aspect of contraception and/or condoms.
- Students will learn about communicable diseases, including those transmitted sexually, and HIV/AIDS.

Program materials and guest speakers supporting instruction on these topics have been reviewed and approved by the local district review committee.

The following are NOT approved by the State Board of Education for instruction and may not be taught:

- The intricacies of intercourse, sexual stimulation or erotic behavior;
- The advocacy of homosexuality:
- The advocacy or encouragement of the use of contraceptive methods or devices;
- The advocacy of sexual activity outside of marriage.

In accordance with Utah State Board of Education Rule R277-474-6-D, teachers may respond to spontaneous student questions for the purposes of providing accurate data or correcting inaccurate or misleading information or comments made by students in class regarding human reproduction.

Please choose one option for instruction listed on the following page

	uctions and/or discussions about the topics (X) checked in this	
box: X Reproductive anatomy and health	X Contraception, including condoms*	
X Human reproduction	X HIV and AIDS (including modes of transmission)	
X Information on self-exams	X Sexually transmitted diseases	
X Date rape	(terms of a sensitive/explicit nature may be defined)	
*Factual, unbiased information about contraception and condoms may be presented as part of this course. Demonstrations on how to use condoms or any contraceptive means, methods, or devices are prohibited and are NOT authorized.		
Name of Student:		
OPTIONS: Please read and check only <u>one</u> of the following:		
Option 1I GRANT permission for my child to participate in the scheduled activities/discussions as described above.		
Option 2 LCP ANT permission for my shild to	or the second of	
I GRANT permission for my child to participate in the scheduled activities/discussions as described above, with the exception of I understand that my child will receive an alternative assignment of equal value and will not attend the regularly scheduled class on the day of this instruction.		
My child will be provided a safe, supervised place within the school during the class period(s). It will be his/her responsibility to report to the pre-arranged location, check in with the teacher or supervisor, and submit the completed assignment to the appropriate person.		
Option 3 Prior to making a decision, I will contact you at the school within the next two weeks to arrange a time to discuss the planned curriculum and/or review the materials.		
a time to discuss the planned carried and	of feview the materials.	
Option 4 I DENY permission for my child to permission in the above box.	participate in any of the scheduled activities/discussions as	
I understand that while my child is not involved in the exempted portion of the curriculum, he/she will be provided a safe, supervised place within the school during the class periods and will receive an alternative assignment related to other elements of the course. I shall take responsibility, in cooperation with the teacher and the school, for the student learning the required course material identified on this form (State Board of Education Rule 277-474-5-D).		
I have read this form and have chosen one option from the preceding list.		
Parent/Guardian Signature:		
Telephone Number:	Date:	



Health Class Contact Info

Student's name	Period
Parent/Guardian contact info (to be used should	d the instructor wish to speak with you concerning
your student):	
Parent/Guardian name(s)	
Daytime phone	Evening
Email address	
To the Parent/Guardian:	
Please use the space below to tell me a	little about your student, ask questions, or voice
any concerns that you may have. Thank	k you for being a part of your child's education!
I have read and understand the syllabus for Hea	alth Class. I agree to follow the classroom rules.
Student Signature	Date
Parent/Guardian	Date

Remember to also return the Human Reproduction Consent Form