**Teacher: Jordan Glessner**

**E-Mail: jordan\_glessner@mail.cl.k12.md.us**

**Planning Period: 2**

**Course Description:**

This class is a graduation requirement for all students. The units that will be covered in this class are physical fitness; alcohol, tobacco, and other drugs; personal safety, first aid and injury prevention; disease prevention and control; nutrition; mental health; consumer health; family life and human sexuality.

**Objectives of the class:**

1. Study the physical, and psychological affects of alcohol, tobacco and drugs
2. Demonstrate basic safety and first aid
3. Understand concepts of disease prevention and control
4. Recognize nutritional value and nutrition disorders
5. Analyze the benefits and importance of fitness
6. Differentiate and recognize positive and negative affects of mental health
7. Encourage healthy lifestyles and responsible decision making

**Materials:**

1. Writing utensil (pen or pencil)
2. 3 ring binder
3. Loose leaf paper

**Expectations:**

1. Report to health room before class begins and sit in assigned seat.
2. Bring all materials to class every day.
3. Turn in all assigned work on time
4. Maintain a positive and encouraging attitude daily.
5. In case of absence- Student must ask for make up work from day missed or ask ahead of time to get assignment before absence. This work must be completed and turned in within two days of returning to school.
6. NO CELL PHONES
7. If student needs to use restroom during class they are responsible for making that time up during lunch.

**Grading Policy:**

25% Tests/Quizzes

20% Written Work- Homework/Classwork

20% Notebook and Current Event Articles

20% Individual and Group Projects

15% Final Exam

Thank you and I am looking forward to the 2012-2013 school year,

Jordan Glessner

Jordan\_glessner@mail.cl.k12.md.us

Sign and Return form to Miss Glessner indicating you have read and understood all policies and procedures

Miss Glessner

Health

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(Print Student Name) (Student Signature and Date)

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(Print Parent/Guardian Name) (Parent/Guardian Signature and Date)

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(Parent/Guardian E-mail) (Parent/Guardian Phone Number)