

Alamo Heights Junior School
7607N. New Braunfels Avenue
San Antonio, TX 78208

Physical Education Substitution Evaluation Form

Turn this form into the **guidance office** before due date.

Student: _____ A. Grade: _____
Parent(s) Phone: _____ Address: _____
Activity Program: _____ Sponsor: _____
Course Instructor: _____
Time Period: _____ Fall Semester _____

Curriculum Requirement

- A. Did this course meet all of the TEKS requirements for physical education? _____
Attach a copy of the course outline.
- B. Did the student attend all practice and/or instruction sessions?
_____ Yes _____ No If no, state reason for absence.
- C. State the number of weeks and the hours per week this student attended the class.
_____ Weeks _____ Hours per week

Student Evaluation

Provide a summary of the student's progress during this semester.

Numerical grade

_____ 1st Semester (August- December) Due to **AHJS guidance office-**
December 15th

_____ 2nd Semester (Jan.- May30th) Dut to AHJS Guidance office by
June 1st

_____ Instructor's Signature