Course Syllabus

Geometry ES

Teacher: Mr. Kaiser Room #: A209

**Course Description:** This course is designed for students with emotional disabilities and tailors content to meet individual needs. Build the skills necessary to continue from Algebra I into Geometric math. Learning geometric concepts and skills needed to continue on in high school mathematics.

**Grading**

 Class Participation Each Day – 5 total points can be earned each day

1. Come to class on time, if you are late bring a signed pass (1 point)
2. Have all electronics turned OFF (1 Point)
3. Follow Directions and complete class work (1 point)
4. Respect others in the room (1 point)
5. Use appropriate language (1 point)

Assessments throughout the course will include**:** Do Now, Class Work, Quizzes, Homework, Projects and Tests

**Daily Classroom Procedures:**

1. Walk in the room and find your seat.
2. Complete the daily Do Now
3. Read the daily agenda that will be written on the board each day
4. Sit quietly and wait for directions
5. Complete the daily work if you have questions raise your hand and ask at any time. Students should raise their hand and wait to be called on before speaking out.
6. A folder will be given to each student all the students completed work should be but in the folder and left in the room.

**Excusals from the Class:**

* Students are not allowed to leave the room unless they have a written pass that is signed by the teacher.
* The school enforces the 10-10 rule, which means that students are not permitted out of the classroom during the first and last ten minutes of each class. This rule is for hallway safety and will be enforced.

**Returning from an Absence:**

If a student is absent from class, they will need to complete any work that was missed during that absence. The student should see the teacher to get the work that was missed during the absence. If the student has questions about the missed work they can see the teacher at the end of class.

**Teacher Contact Information:**

Email – akaiser@eriesd.org

Phone # 814-874-6200 ext. 1753

Please have a guardian sign and return this form. By turning this form back in on time you will receive 10 points.

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Guardian’s Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_