

EXTRACURRICULAR PROGRAMS POLICY
KRS 160.345(2)(I)8



CRITERIA FOR PROGRAMS

For an extracurricular program to be continued or to institute a new program, the program must:

1. Contribute to the following Kentucky Learning Goals:
 - Becoming a self-sufficient individual.
 - Becoming responsible members of a family, work group, or community, including demonstrating effectiveness in community service.
2. Generate and maintain student interest as well as attract students currently not involved in extracurricular or service projects.
3. Encourage, enhance, and maintain equity including but not limited to a wide range of opportunities for both male and female students.
4. Have a suitable adult sponsor and have appropriate adult supervision at all times.

PROGRAMS CURRENTLY OFFERED

Listed below are the extracurricular programs we currently provide. Additional programs will be approved and instituted based on their ability to meet the criteria listed in the first section of this policy.

**The following programs may be offered depending on funding and/or staffing resources:*

1. Academic Team
2. After-School Tutoring
3. S.A.F.A.R.I. School
4. Lego/Robotics Club
5. Basketball Team
6. Track Team
7. GEMS Club
8. Girls United
9. Beta Club

STUDENT PARTICIPATION

Students will be eligible to participate in extracurricular activities if they:

1. Maintain passing grades in all subjects.
2. Were in attendance on the day of the activity or on Friday for weekend activities.
3. Comply with rules established by the adult coach or sponsor for the activity.
4. Where applicable, meet any requirements set by the appropriate sponsoring or governing organization.

PROGRAM EVALUATION

Our extracurricular program will be evaluated through the needs assessment process for updating our School Improvement Plan.

POLICY EVALUATION

We will evaluate the effectiveness of this policy through our School Improvement Planning Process.

First Reading: 10-27-2014

Second Reading: 11-24-2014

Date Reviewed or Revised: _____

Council Chairperson's Initials _____

Date Reviewed or Revised: _____

Council Chairperson's Initials _____