SCHOOL-DEVELOPED LEARNING AND ASSESSMENT PLAN

**YEAR 10 Health and Physical Education**

School: Semester: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teacher(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Year 10 Health and Physical Education**  **Australian Curriculum Content Strands and Descriptions**  *Use shading to indicate the content descriptions students will have the opportunity to provide evidence for over the four assessment tasks.* | | | | | | | | | | | | | | | | | |
| **Health** | | | | | | | | | | **Physical Education** | | | | | | | |
| **Personal, Social and Community Health** | | | | | | | | | | **Movement and Physical Activity** | | | | | | | |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** |

|  |  |  |  |
| --- | --- | --- | --- |
| Endorsed by principal or delegate (signature) |  | Date |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Office use only   |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Approved |  | Not approved |  |  |  |  |  |  |  |  |  |  |  |   Accession Number   |  |  | | --- | --- | | Signature of NTCET Officer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  | |

**Addendum**

Please **only** use this section for any changes made after the learning and assessment plan has been approved.

**Changes made to the learning and assessment plan**

|  |
| --- |
| Describe any changes made to the learning and assessment plan to support students to be successful in meeting the requirements of the subject. In your description, please explain:   * what changes have been made to the plan * the rationale for making the changes * whether these changes have been made for all students, or individuals within the student group. |

**Endorsement of changes**

The changes made to the learning and assessment plan support student achievement of the performance standards and retain alignment with the subject outline.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature of principal or delegate |  | Date |  |

Year 10 Health and Physical Education

Assessment Overview

Complete the table below to show details of the planned tasks. Use numbers to show where students will have the opportunity to provide evidence for each of the specific features for all assessment design criteria.

| **Assessment Type and Weighting** | **Task and Weighting** | **Details of assessment** | **Assessment Design Criteria** | | | | **Assessment conditions**  *(e.g. task type, word length, time allocated, supervision)* |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **KU** | **PSA** | **IC** | **AE** |
| **Health**  **50 %** | Group Activity |  |  |  |  |  |  |
| Issues Response |  |  |  |  |  |  |
| Optional Practical |  |  |  |  |  |  |
| **Physical Education**  **50 %** | Practical |  |  |  |  |  |  |
| Practical |  |  |  |  |  |  |
| Integrated or Supervised task  OR  Investigation |  |  |  |  |  |  |

***Five or six assessments.*** *Health: Group Activity and Issues Response with an option for a Practical - Physical Education; two practicals and one of either Integrated or Supervised task OR an Investigation*