SYLLABUS

DATE OF LAST REVIEW: Fall 2004

CIP CODE: 24.0101

SEMESTER: Departmental Syllabus

COURSE TITLE: Aerobics (Group Fitness)

COURSE NUMBER: EXSC0101

CREDIT HOURS: 1

INSTRUCTOR: Departmental Syllabus

OFFICE LOCATION: Departmental Syllabus

OFFICE HOURS: Departmental Syllabus

TELEPHONE: Departmental Syllabus

PREREQUISITES:
Students MUST have a KCKCC student ID card to participate in Aerobics (Group Fitness) classes. Students must check in at the Wellness & Fitness Center prior to the start of the class. Students arriving more than 10 minutes late will not be permitted to attend class because they have missed the warm-up routine. For safety purposes, all students must participate in the entire class format including warm-up.

REQUIRED TEXT AND MATERIALS:
Handouts provided by instructor. Plastic water bottle, appropriate clothing and towel. Other items will be discussed during the first class meeting. A physician’s recommendation is required for the following individuals: Men over 40, women over 50, individuals with cardiovascular disease, asthma, diabetes, or any known disease or orthopedic injury. If you are unsure of your situation, please discuss this with your instructor prior to participating in the class.

COURSE DESCRIPTION:
A list of various types of aerobic classes will be available for students to participate in each semester. A list of aerobic classes and times is located within the KCKCC Wellness & Fitness Center website or at the front desk of the wellness center. The aerobic classes will include cardiovascular, resistance training, muscle toning, stability and flexibility. Aqua aerobic classes are not included within this group fitness.

METHOD OF INSTRUCTION:
A variety of instructional methods may be used depending on content area. These include but are not limited to: lecture, multimedia, cooperative/collaborative learning, labs and demonstrations, projects and presentations, speeches, debates, and panels, conferencing, learning experiences, and performances outside the classroom. Methodology will be selected to best meet student needs.
COURSE OUTLINE:
I. Physical Activity Readiness Questionnaire
II. Student Information Profile
III. Consent Form
IV. Each class will consist of a 5 minute warm-up, 20-30 minutes of aerobics, step training, or circuit training, a 5 minute cool down, and 10-15 minutes of muscle toning.
V. Basic health concepts such as heart rate checks, nutrition analysis, basic nutrition facts, stretching and flexibility are taught.
VI. The difference between circuit training and aerobic fitness training is discussed.

EXPECTED LEARNER OUTCOMES:
1. The student will be able to improve cardiovascular endurance.
2. The student will be able to improve muscular strength and endurance.
3. The student will be able to improve flexibility.
4. The student will be able to enhance body composition.
5. The student will be able to improve agility, rhythm, coordination, and posture.
6. The student will be able to recognize basic nutrition concepts.

COURSE COMPETENCIES:
1. The student will be able to improve or maintain cardiovascular endurance.
2. The student will be able to employ techniques learned in class to self-train the cardiovascular system.
3. The student will be able to explain the required intensity, duration and frequency of training.
4. The student will be able to improve and maintain flexibility.
5. The student will be able to improve agility, coordination, rhythm and timing.
6. The student will be able to improve core (abdominal) strength and endurance.
7. The student will be able to review basic nutrition needs.
8. The student will be able to demonstrate self-motivation.

ASSESSMENT OF LEARNER OUTCOMES:
Students will receive a letter grade based on attendance. Grading is based on the total number of classes attended by the end of the term. Students may attend ANY class on the aerobic (group fitness) schedule. Aqua Aerobic classes are not a part of this group fitness aerobic class.

23-25 classes = A
20-22 classes = B
17-19 classes = C
14-16 classes = D
below 14 classes = F

SPECIAL NOTES:
This syllabus is subject to change at the discretion of the instructor. Material included is meant to provide an outline of the course and rules that the instructor will adhere to in evaluating the student's progress. However, this syllabus is not intended to be a legal contract. Questions regarding the syllabus are welcome any time.
Kansas City Kansas Community College is committed to an appreciation of diversity with respect for the differences among the diverse groups comprising our students, faculty, and staff that is free of bigotry and discrimination. Kansas City Kansas Community College is committed to providing a multicultural education and environment that reflects and respects diversity and that seeks to increase understanding.

Kansas City Kansas Community College offers equal educational opportunity to all students as well as serving as an equal opportunity employer for all personnel. Various laws, including Title IX of the Educational Amendments of 1972, require the college’s policy on non-discrimination be administered without regard to race, color, age, sex, religion, national origin, physical handicap, or veteran status and that such policy be made known.

Kansas City Kansas Community College complies with the Americans with Disabilities Act. If you need accommodations due to a documented disability, please contact Valerie Webb, Room 3354 or 288-7670 V/TDD.
KANSAS CITY KANSAS COMMUNITY COLLEGE

COMPETENCY INDEX

Course Number/Section/Title: _______________________________________

Student Name:_________________________ Student Number:______________

Instructor:_________________________ Division:_________________________

RATING SCALE for Competency Achievement

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<tr>
<th>Rating</th>
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DIRECTIONS:

Evaluate the student by checking or highlighting the appropriate number to indicate the degree of competency achieved.

Check one of the following:

______I certify that the student completed the course and the competencies indicated.

______I certify that the student completed 25% of the course competencies, as indicated.

Instructor Signature:__________________________________________