**Course Syllabus**

**Algebra I Honors**

**2020- 2021**

**Teacher:** Ms. Salvo **E-Mail:** salvoe@pcsb.org

**Overview:**

Students will study mathematics using a variety of techniques, which relate to real world applications. Concepts will be integrated to align with the Pinellas County Student Expectations for High School Algebra II.

**Course Materials:**

* Lined college ruled paper
* Mechanical pencil or two sharpened pencils every day
* 4 binder tab dividers – (Bell Work, Notes, Homework, and Assessments)

**Online Resources:**

* Grades will be available on **focus.pcsb.org**.
* E-book and assignments will be available through **clever.com** on the **SAVVAS** app.
* Course Materials will be available through **clever.com** on the **Canvas** app.
* Virtual Meetings will be held through the **Teams** application.

**Mobile Apps:**

* Teams
* Canvas Student
* Pinellas County Schools App

**Absences:**

When you are absent from class, it will be **your** responsibility to obtain and complete missed assignments. **I will not be able to provide your missed assignments during class time.** All missed work can be found be accessing the Canvas app through Clever. Students will be allowed the same number of days to make up any missed assignments as the number of days you were absent (e.g. If a student misses one day, they will have one day to submit missed work.) If you miss a test or quiz due to an illness or school-sanctioned athletic/extracurricular activity you will take a makeup assessment in class when you come back. Cases of extended illness may be handled on an individual basis.

**Tutoring:**

Sign up for tutoring during lunch/after school with Ms. Salvo on Tuesdays and Thursdays. These dates may occasionally change depending on meeting schedules and students will be notified.

**Academic Integrity:**

Please review and follow the guidelines on the *Academic Integrity Agreemen*t.

**Student Responsibilities:**

* Electronic devices are to be put away at **ALL TIMES** during class unless otherwise instructed.
* Hall passes will not be given during the beginning 10 minutes of class or during the final 10 minutes of class in keeping with school policy. Students will get 4 hall passes per quarter. Any unused hall passes can be turned into Ms. Salvo at the end of the quarter for extra credit.

**Consequences:**

1. Warning
2. Detention and call home
3. Referral

**Grading:**

|  |  |
| --- | --- |
| **Category** | **Percentage** |
| Assessments (tests, quizzes)* **Tests** will be worth the most points in this course and an entire topic assessment. Students will need to submit any work for an online test.
* **Quizzes** will cover 1-2 lessons at a time. Quizzes will be worth less points, but will occur more frequently (every few classes). Students will need to submit work for an online quiz.
 | 45% |
| Classwork/Homework* **Homework** will be assigned through SAVVAS. The homework will be assigned at the end of most lessons. Homework will be graded for accuracy. Students will receive a curve to benefit their homework grade for submitting their work.
* **Classwork** will consist of completion of notes, practice problems, and time on task in class.
 | 40% |
| Binder Check* **Binder checks** will occur by submitting notes through Canvas for each lesson. There will be two binder check quizzes based off of the notes that students completed in class.
 | 15% |

**\*\* Assessment Retakes** are available for students if students would like to improve their assessment score. A student must complete the original test with valid effort and attend at least one tutoring session to be able to retake an assessment.

**This will be placed in the front of the Algebra 1 section of the student’s binder.**

**I have read and understand the rules and expectations for Ms. Salvo’s Algebra I Honors class.**

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| Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Parent/Guardian’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Student Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Parent/Guardian’s Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Parent/Guardian’s Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Questions, concerns, or important information you want me to know as your child’s teacher: