Integrated Math 1B Syllabus

School: *Garfield High*

**Garfield High School**

1255 16th Street • San Diego, CA • 92101

(619) 362-4500 ext. 2201

**Mrs. Jamie Craig, Room 201**

**Phone:**   619-362-4500 ext. 2201

**Email:**   jcraig@sandi.net

**Office Hours:**  Room 201 (Mon-Fri)  8:00-8:25, 11:25-11:50, 2:45-3:15

**Course Content**: Integrated Math 1 is the first of three Common Core State Standards high school-level courses that integrate algebra, geometry, trigonometry, and statistics. This course will focus on extending students’ understanding of linear functions and their applications.  Topics will include solving multi-step equations, modeling real-world situations, sequences, properties of geometric figures, introduction to proofs, and coordinate geometry.

**Homework:** Most of the work for this course will be completed in class. However, assignments that are not completed during class time will be considered homework and will be due the following day.

If you are absent, it is your responsibility to ask for the assignments you missed.

**Grading Policy:**

|  |  |
| --- | --- |
| 90-100% | A |
| 80-89% | B |
| 70-79% | C |
| 60-69% | D |
| 59% and below | F |

Student grades will be based upon chapter tests, and assignments. A quarter of the grade will come from classroom participation in the form of the student notebook. Within the notebook, students will complete daily warm-up activities, classwork activities, note-taking, and various other activities. The notebook will be collected weekly for a grade. The breakdown is as follows:

Tests = 65%

Participation/Notebook = 25%

Assignments = 10%

**Rules and Expectations:**

* Respect. I will treat each and every student with respect. In return, I expect the same. Students are also expected to show respect to their peers. Negativity and/or disrespect will not be tolerated in my classroom.
* No electronic devices allowed. This includes cell phones, tablets, iPads, etc.
* Give your best effort. Show up to class alert and mentally prepared to learn.
* Copying/cheating will not be tolerated. If found cheating, you will receive a zero on that assignment.
* All other school rules apply, as indicated in the student manual.

Disregarding the above rules and expectations will result in a verbal warning. Continued offense could result in referral to counselor or vice principal, and/or possible suspension from my class.

**Class Schedule (subject to change):**

|  |  |
| --- | --- |
| Week 1 | Ch. 5: Intro to Functions |
| Week 2 | Ch. 5: Laws of Exponents |
| Week 3 | Ch. 6: Mean, Median, Mode/ Data Displays |
| Week 4 | Ch. 6: Lines of Best Fit/ Data Trends |
| Week 5 | Ch. 7: Intro to Geometry |
| Week 6 | Ch. 8: Length, Measure, Congruence |
| Week 7 | Ch. 8: Corresponding Parts/ Triangle Congruence |
| Week 8 | Ch. 8: Distance and Midpoint Formula/ Parallel and Perpendicular Lines |
| Week 9 | Ch. 8: Translations/ Reflections/ Rotations |

 **STUDENT ACCOUNTABILITY CONTRACT**

As a student, I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, will be responsible for:

                           (print full name)

1.       Showing respect and cooperating with adults on campus.

2.       Coming to class on time and prepared to work.

3.       Completing all assignments to the best of my ability.

4.       Respecting the rights of others to learn without disruption.

5.       Showing respect for people and property by not using profanity, stealing or vandalizing.

6.       Practicing the rules of the classroom, school and district.

7.       Spending time at home on assignments given.

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STUDENT SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STUDENT EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STUDENT CELL PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dear Parent/Guardian,

I am looking forward to working with you and your student to make this a great school year.  If you ever have any concerns regarding you student’s progress, please do not hesitate to contact me.  Once you have reviewed and discussed this syllabus with your child, please sign and return this sheet.  I encourage you to provide your email address and times of availability so that I can better communicate with you regarding your child’s progress.

Thank you

Mrs. Jamie Craig

PARENT/GUARDIAN NAME (printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
PARENT/GUARDIAN PHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
PARENT/GUARDIAN EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LANGUAGE PREFERENCE:  English (     )                   Spanish (    )                        Other:

OTHER CONTACTS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_