Integrated Math 3B Syllabus (2019-20)

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](mailto: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 3 is the third of three Common Core State Standards high school-level courses that integrate algebra, geometry, trigonometry, and statistics. This course will focus on exploring various types of functions, trigonometry, statistical inference, and sequences and series.

**Google Classroom:** I will be posting all assignments as well as extra materials, resources, and answer keys in Google Classroom. It is your responsibility to log in and check the Google Classroom daily. If you are absent, it is your responsibility to check the Google Classroom for the assignments you missed.

**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.

**Grading Policy**:

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

**Grading Policy**:

Tests = 70%          
Assignments/Notes/Participation = 30%

**Rules and Expectations:Be respectful.**

* Be responsible. Be present.
* No electronic devices or headphones allowed during class time.
  + First offense: verbal warning
  + Second offense: device will be confiscated and sent to office and phone call home
* No hats, hoods, or headgear of any kind allowed on campus.
  + First offense: verbal warning
  + Second offense: hat/headgear will be confiscated and sent to office and phone call home
* Copying/cheating is a serious offense and will not be tolerated. If found cheating, you will receive a zero on that assignment and will not have the ability to make it up.
* All other school-wide expectations/policies 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.

You **WILL BE SUCCESSFUL** in my class if you SHOW UP & COMMIT TO PUTTING IN EFFORT every day.  
  
I am passionate about helping all students (especially those who have previously struggled) make sense of math and see the beauty in it!

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

|  |  |
| --- | --- |
| Week 1 | Ch. 7: Polynomial and Rational Functions |
| Week 2 | Ch. 7: Polynomial and Rational Functions |
| Week 3 | Ch. 7: Polynomial and Rational Functions |
| Week 4 | Ch. 3: Probability |
| Week 5 | Ch. 2: Sequence/Series |
| Week 6 | Ch. 2: Sequence/Series |
| Week 7 | Ch. 9: Conic Sections |
| Week 8 | Ch. 9: Conic Sections |
| Week 9 | Ch. 9: Conic Sections |

**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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_