STUDENT ATHLETIC TRAINER AIDE PROGRAM Application

Expectations

1. Be willing and able to work the Athletic Training hours on any day of the week.
This includes before school, after school, evenings, school holidays, and weekends. Not Sundays.
2. All Student Athletic Trainer Aides will be required to work at least two (2) sport seasons each school year.
3. Be willing to engage in hard work including but not limited to keeping the athletic training room tidy, daily practice and game set-up, transporting of sports medicine gear to and from games/events, inventory & restocking of training room supplies, assisting with student athlete treatments and rehabs, etc.
4. Be willing to learn the basic skills of first aid, taping, stretching, recovery rolling instruction, and treatment assisting, etc.
5. Be able to work well with others in a wide variety of sports.
6. Be enthusiastic, show interest in Sports Medicine, and have an overall positive attitude.
7. Be always neat and clean in personal appearance (hair, makeup, dress code, personal hygiene, etc.).
8. Be able to establish and maintain a good relationship with all athletes, coaches, and other student staff members.
9. Always Show all participants and staff respect.
10. Follow the instructions of the Head Athletic Trainers, your athletic training peers and other members of the coaching staff.
11. Student Athletic Training Aides that are maintaining jobs or involved with other school and/or community activities will be accepted. A participation schedule will be worked out on an individual basis. However, a limit will be set as to the number of games and practices that can be missed each week. Work schedules must be provided weekly prior to missing any practices/games in the assigned sport.
12. Participation in the program's communication app is a requirement for all student athletic trainers. The Head Athletic Trainer will utilize this to communicate/post all team game schedules and practice schedules if provided by the coach. They will also communicate any team practice/game changes, travel information, game day dress and weather issues to students on a regular basis, etc.

Qualifications:

1. Must maintain a class average of 70 in all classes for every 9 weeks. Students whose grades drop below this will be subject to the same eligibility restrictions set forth by UIL. Candidates with a history of grades below 70 in multiple classes over multiple 9 weeks will need approval from the Head Athletic Trainer prior to joining the program. Those that are accepted with a history of grade issues, will be placed on probation. Any students that are admitted on a probationary basis who fail any 9 weeks in the first semester are subject to a schedule change at the end of the 1st semester.
2. Students that fail more than 2 nine weeks will be removed at the semester break, those that continue to have grade issues, will be removed from athletics at the end of the school year.
3. Students must meet and maintain satisfactory code of conduct standards as laid out by the student handbook and the student athlete handbook.
4. **Must provide a Sports Physical stating "cleared to participate" every year to ensure they are healthy enough to participate in the workload that is done daily**.

Selection Process:

1. Interested students must meet all the qualifications mentioned above.
2. Interested students must complete the application on the back in full, including student and parent (guardian) signatures, 1 letter of recommendation from a teacher/coach.
3. School officials (teachers, principals, counselors, coaches, etc.) will be consulted regarding the prospective student's grades, conduct, attitude, etc.
4. All applicants will have a personal interview with the Head Athletic Trainer.
5. After the interview process, the Head Athletic Trainer will make selections from the group of applicants for the next school term.
6. Once selected, the Student Athletic Trainer Aide candidate will be enrolled into an athletic period, provided it is acceptable within the student credit requirement needs. Counselors will make this decision.

ATHLETIC
cavaliers
TRAINING

STUDENT ATHLETIC TRAINER AIDE APPLICATION

Name: _____ Entering Grade: 9 10 11 12

Address: _____ Age: _____ Birth Date_____/_____/_____

_____

_____

Student Phone Number (_____) _____ Student School Email: _____

Parent 1 (Guardian)Name(s): _____ Parent 2 (Guardian)Name(s):_____

Parent 1 Phone Number (_____) _____ Parent 2 Phone Number (_____) _____

Favorite Sonic Drink: _____ Favorite Snacks: _____

If you need more space to complete any of the information below or want to add any additional information, please feel free to attach a separate sheet of paper.

List the courses currently enrolled (or last completed) as well as your teacher names, and academic grades.

	Course	Teacher	Academic Grades
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

List ***two references*** (preferably teachers or coaches) & submit ***1 letter of recommendation*** (preferably teachers or coaches):

Name Occupation Phone Number

_____

_____

List any athletic and/or medical experience that you feel may help you in your Sports Medicine duties. _____

_____

_____

Briefly explain why you want to be a Student Trainer: _____

_____

_____

If selected, what do you expect to learn (or do) as a Student Trainer? _____

_____

_____

What are your plans after High School (College, Career, Military, etc.)? _____

_____

_____

List any activities, hobbies, interests, or jobs in which you are involved. _____

_____

_____

I understand that the members of the Sports Medicine Program at College Park HS are selected by the Head Athletic Trainer employed by the district. Members can be dismissed from the program by the Head Athletic Trainer for violation of present and future policies set forth by the Athletic Department and/or Sports Medicine Program at College Park HS. If selected, I agree to follow all policies, procedures, and duties as assigned to me to the best of my abilities. In signing, I agree with and understand all the information stated above. If any of the above information I have provided changes, I will notify the Head Athletic Trainer at the earliest possible convenience.

_____ _____

Student Signature Date Parent or Guardian Signature Date

COLLEGE PARK HIGH SCHOOL
ATHLETIC TRAINING PROGRAM
CLOTHING ORDER AND AGREEMENT FORM

Daily Practice Dress Code:

- Athletic Training student aides are required to wear athletic attire daily to practices that are in accordance with the school color system including but not limited to their outer wear. (Black, grey, or navy)
- Clothing with logos that are not school/campus related will not be allowed.
- Athletic Shoes that are closed toe must be worn to all practices and games. Rain boots are allowed in bad weather.
- Game Day bottoms are Khaki style shorts or pants and can be in the following colors: Black or khaki selected yearly.
- Appriopriate length

Clothing Order and Agreement:

*Unisex t-shirts, men's polo

*Polo Size: XS S M L XL 2XL 3XL

*T-Shirt Size: XS S M L XL 2XL 3XL

Pullover Top Size: XS S M L XL 2XL 3XL

Pullover Bottom Size: XS S M L XL 2XL 3XL Rain/

Wind Suit Top/jacket Size: XS S M L XL 2XL 3XL

Rain/Wind Suit Bottom Size: XS S M L XL 2XL 3XL

*Athletic Training students are required to purchase ***1 Game Polo*** and ***1 Pullover to be selected each year***.

A team shop will be set up for you to be able to purchase clothing items for you to wear at practices and games. I will use the above sizes if the Athletic Training Program can purchase extra clothing at a later date.

_____ _____

Student Signature Date Parent/Guardian Date

Program Applications must be submitted by April 1, 2025.

Coach McDonald **jmcdonald@conroeisd.net** ***936.709.3160***