



CHS SPORTS MEDICINE PROGRAM APPLICATION

The CHS Sports Medicine program is seeking enthusiastic and committed students that are interested in pursuing a health career. We would like interested students to become student athletic trainers, working with athletes and coaches throughout the school year. Being a student athletic trainer you will learn basic first-aid/CPR and techniques in prevention, recognition, management and rehabilitation of athletic injuries. As a student athletic trainer you must be committed to working athletic contests that you are assigned to cover (mandatory 10 hrs. per semester). Student athletic trainers can earn a varsity letter after completing two years and remain in good standing with the Sports Medicine program. It is important that you discuss this opportunity with your parents before making a commitment to the Student Trainer Sports Medicine Program.

Please complete this application and return to CHS Sports Medicine Instructor, Mr. Hoke, before student registration begins.

Last Name _____ First Name _____ Student I.D. # _____

Days absent from school this past year _____ Cumulative GPA _____

Briefly describe why you would like to be enrolled in the CHS Sports Medicine Program.

Are you planning to be involved in any school extra-curricular activities next year? If so, what?

As an applicant to the CHS Sports Medicine Program I understand I must abide by the expectations of the program as well as the Athletic Trainer Instructors.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

All Applicants are required to have the Signature of the Athletic Trainer Instructor, your grade level Counselor and Dean.

Athletic Trainer Instructor: _____ Date: _____

Counselor: _____ Date: _____

Dean: _____ Date: _____