



Athletic Training

APPLICATION

Thank you for your interest in the Athletic Training Program at Rockwall-Heath High School. We are excited about the possibility of having you join our team for the 2020-2021 school year. Please COMPLETELY fill out the information below and return it with the required documents to the RHHS staff athletic trainers or your RHHS counselor.

Name: _____ Student ID#: _____

Incoming grade: _____ Gender: _____

Student Phone #: _____ Email: _____

This program involves a substantial commitment of your time. Each student athletic trainer (SAT) will be required to work football season (some exceptions apply). This means being committed to starting in late July or early August. SAT's are to be present at all assigned practices and games, no exceptions, unless communicated with the staff athletic trainers in advance (not including emergencies). This also means showing up early to set up and staying late to clean, store equipment or other assigned duties. We ask that you sincerely consider all aspects of the program before submitting your application.

After fall sports have ended, SAT's will have an opportunity to work winter/spring sports. You will be expected to attend practices, all home games and assigned away games. We believe this helps form relationships with the coaches and athletes.

The Athletic Training Program is considered an elective which takes place during 1st and 8th period athletics. You will NOT receive a PE credit. If you are an incoming freshman or this will be your first year in the program, it is HIGHLY RECOMMENDED that you take the Sports Medicine I course.

If you are accepted into RHHS Athletic Training Program you will be required to abide by our student handbook, which includes maintaining **all passing grades**. If you are continually unable to do so, you will be dismissed from the program.

While we want you to have fun, please understand that being a part of our program is a privilege. All specific policies and procedures will be discussed at a parent meeting in the spring. We look forward to seeing you there.

Please tell us in your own words why you would like to be a part of the RHHS Athletic Training Program.

What are some things you believe you could bring to this program? What are some things that you think this program could add to your high school experience?

(Answer both)

Are you interested in a career in the healthcare profession?

YES NO UNSURE

If yes, what kind of healthcare profession are you interested in?

What other commitments are you apart of? (jobs, clubs, sports, etc...)

With this application please provide (1) LETTER of recommendation from a TEACHER/COACH or instructor in a sealed, signed envelope. Include this with the application and a copy of your TERM GRADES for one year. If you are an incoming freshman, please give us your last year of term grades.

WARNING: Please note, you will see many different types of injuries and situations; including but not limited to blood, broken bones, bruises, ambulance calls, asthma attacks and possibly even seizures. Please be aware that if you are not comfortable assisting in emergency situations this may not be an area for you.

I HAVE READ ALL OF THE ABOVE AND FILLED IT OUT TO THE BEST OF MY ABILITY AND HEARBY AGREE THAT ALL THE ABOVE STATEMENTS ARE TRUE AND ACCURATE.

Student Signature _____ Date: _____

Parent Signature _____ Date: _____

If you have any questions, please feel free to email Chad Warfuel at chad.warfuel@rockwallisd.org, Angela Perez at angela.perez@rockwallisd.org and Jenny Utterback at jenny.utterback@rockwallisd.org.