KINESIOLOGY PRACTICUM DESCRIPTION

Practicum Position Title: Personal Training Assistant

Agency/Company: Ironside Fitness

Locations: NW Calgary - #114, 8060 Silver Springs Blvd NW
SW Calgary - #23, 8 Weston Drive SW

Terms Available: Fall, Winter, or Spring

Number of Positions: 1-2

Project Duties/Responsibilities:

Ironside Fitness is a leading fitness, wellness and nutrition training center with two locations in Calgary. Practicum students will:

- Assist personal trainers in group fitness sessions including weight training, balance training, cardiovascular training and flexibility training.
- Help plan workouts and assist clients to demonstrate proper form and modifications.
- Take client measurements, weight, and body fat percentage.
- Become familiar with workout programs, periodization and how we change the workouts to focus on different aspects of fitness as well as different muscle groups and intensity levels.
- Help describe and demonstrate injury rehabilitation measures such as specific home workout exercises for wrists, shoulders, backs and knees for specific client needs.
- Assist with technology such as using our Fit clients tracking software, body fat calculator, and social media aspects relating to the business including twitter, Instagram, YouTube and Facebook.

Required Student Qualifications:

- Completion of KNES 373 (Exercise Physiology)
- Completion of KNES 375 (Tests & Measurements in Kinesiology)
- Ability to discuss client goals openly and honestly with clients

Assets:
- Past personal training experience an asset

On-Site Supervisor: To be determined. Contact Charmaine Ironside, B.Kin., training@ironsidefitness.com
Kinesiology Practicum Application

Placement: Ironside Fitness

Students must have 60 units completed to qualify for a practicum, including 30 units of KNES
Students may participate in up to three practicums, with no more than two at the same location

INSTRUCTIONS
1. Contact the on-site supervisor to arrange an interview.
2. Bring a copy of this application with the completed student portion to your interview to be completed by the On-Site Supervisor.
3. Submit application and required documentation (if applicable) to knespracticum@ucalgary.ca; our office will email your @ucalgary address within 5 business days with next steps for you and your On-Site Supervisor.

STUDENT PORTION – COMPLETE PRIOR TO INTERVIEW

<table>
<thead>
<tr>
<th>Practicum Term</th>
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<tbody>
<tr>
<td>Fall __________ (year)</td>
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<tr>
<td>Winter __________ (year)</td>
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<tr>
<td>Spring __________ (year)</td>
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<table>
<thead>
<tr>
<th>Student Information</th>
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<tbody>
<tr>
<td>Name:</td>
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<tr>
<td>UCID:</td>
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| Phone Number:                  |
| Email:                         |
| @ucalgary.ca                   |

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<tr>
<th>Student Practicum Expectations:</th>
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<tbody>
<tr>
<td>Why have you chosen this practicum placement? (1-2 sentences)</td>
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<tr>
<th>Code of Conduct</th>
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<tr>
<td>Students are responsible for compliance with the University of Calgary’s Code of Conduct.</td>
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| ☐ Yes ☐ No | I have read and understood the University of Calgary’s Code of Conduct. |
| ☐ Yes ☐ No | Do you have a pre-existing relationship(s) with person(s) or group(s) associated with this practicum placement? |
| If yes, please briefly explain the nature of the relationship: |

I agree that:
- No salary or payment will be received based upon my participation in a Kinesiology practicum placement
- I will meet the expectations of the practicum placement for which I am applying
- I will be punctual throughout my practicum placement and will adequately notify the On-Site Supervisor about any absence(s).
- I will complete 60-72 hours within the dates of the term.

Start Date (first day of lectures)          End Date (last day of lectures)

☐ I agree with the above-mentioned terms and conditions.

Student’s Signature: Date:

ON-SITE SUPERVISOR PORTION

| Name:                          |
| Organization: Ironside Fitness |

| Phone:                          |
| Email:                          |

As the On-Site Supervisor, I agree that:
- No salary or compensation will be given to the practicum student
- I will provide sufficient hours, supervision, and guidance during this practicum placement
- I will complete a mid-point and final evaluation for the practicum student.

☐ I agree with the above-mentioned terms and conditions.

On-Site Supervisor’s Signature: Date:
CONFIDENTIALITY AGREEMENT

Practicum students and the agency must complete the signed confidentiality agreement and submit it (along with the practicum application form) to knespracticum@ucalgary.ca.

THIS AGREEMENT is made as of the ______day of_______, 20____.

BETWEEN:

________________________________________________________

(hereinafter called the "Agency")

AND:

________________________________________________________

(hereinafter called the "Student")

Whereas:

It is the Student's legal and ethical responsibility to protect the privacy, confidentiality and security of all records, proprietary information and other confidential information relating to the Agency, including business, employment and medical information relating to patients, members, employees and health care providers. ("Confidential Information").

And whereas:

The Agency has adopted policies and procedures regarding Confidential Information including its policies and procedures for complying with the Freedom of Information and Protection of Privacy Act and the Health Information Act ("Policies and Procedures").

In witness hereof, the parties agree as follows:

1. The Agency agrees to disclose and the Student agrees to receive Confidential Information in furtherance of participating in his/her practicum with the Agency, as set out in the Practicum Agreement.

2. The Agency agrees to advise, instruct and guide the Student as to the Policies and Procedures.

3. Upon receipt of the information set out in paragraph 2 herein, the Student agrees to use his/her best efforts to comply with the Policies and Procedures and to protect the Confidential Information, or any part thereof, and prevent it from being disclosed to any person contrary to the Policies and Procedures.

IN WITNESS WHEREOF, the parties have duly executed this Agreement effective as of the day and year first written above.

Agency

Signed: ____________________________

Print Name: _______________________

Title: _____________________________

Date: _____________________________

Student

Signed: ____________________________

Print Name: _______________________

Date: _____________________________

__________________________________________

2500 University Drive N.W., Calgary, Alberta, Canada T2N 1N4 ucalgary.ca/knes