KINESIOLOGY PRACTICUM DESCRIPTION

Practicum Position Title: Kinesiologist - Personal Training Practicum

Agency/Company: Calgary Jewish Community Centre (JCC)

Location: 1607 90 Ave SW, Calgary, AB

Terms Available: Fall, Winter, or Spring

Number of Positions: 4

Project Duties/Responsibilities:

The Calgary JCC is a non profit recreation center that serves Calgary’s southwest community. The Calgary JCC serves as the Jewish ‘living room’ of the community, while offering social, educational, recreational and cultural programming to individuals and families of all ages, stages and backgrounds.

Under Strict Supervision of a JCC Fitness Professional, the practicum student will:

- Assist in designing individualized one-on-one personal training programs for general and clinical populations.
- Assist in leading the following classes:
  - Healthy Living: Clinical population that has been sent to the Alberta Health Services program. All of the participants are living with a chronic condition.
  - Active Living: Graduates of the Healthy Living program that are looking to continue exercising move into our Active Living program.
  - PWR! Moves (Parkinson Wellness Recovery): An exercise program design to counter the hallmarks of Parkinson Disease.
- During all three classes, the student will be involved in running warm ups/cool downs, demonstrating resistance band training techniques, setting up exercise circuits and ensuring the safety of participants.
- Assist personal trainers with program delivery by attending team training and small group training sessions.

Required Student Qualifications:

- Completion of KNES 373 (Exercise Physiology)
- Must be working toward obtaining CSEP-CPT or CEP designation
- Valid Standard First Aid Certification and CPR Level C
- Valid Police Information Check
- Interest in working with a clinical population

On-Site Supervisor: Scott Russell, srussell@cjcc.ca
Kinesiology Practicum Application

Placement: Calgary Jewish Community Centre (JCC)  
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

| Practicum Term |  |  |
|----------------|------------------|
| ☐ Fall ________ (year) | ☐ Winter ________ (year) | ☐ Spring ________ (year) |

Student Information
Name: [ ]
UCID: [ ]

Phone Number: [ ]
Email: [ ]@ucalgary.ca

Student Practicum Expectations: Why have you chosen this practicum placement? (1-2 sentences)

Code of Conduct
Students are responsible for compliance with the University of Calgary’s Code of Conduct.

☐ 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: Scott Russell
Organization: Calgary JCC

Phone: [ ]
Email: srussell@cjcc.ca

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: [ ]

Submit together to knespracticum@ucalgary.ca:
☐ Completed Practicum Application
☐ Confidentiality Agreement

Submit to JCC:
☐ Police Check
☐ First Aid & CPR Cert.
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: ____________________________  Signed: ____________________________

Print Name: _________________________  Print Name: _________________________

Title: ______________________________  Date ______________________________

Student

Date: ______________________________

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