FACULTY OF KINESIOLOGY

Undergraduate Practicum Office
KNB 142 | 2500 University Drive NW
Calgary | AB |Canada T2N 1N4
knespracticum@ucalgary.ca

KINESIOLOGY PRACTICUM DESCRIPTION

Practicum Position Title: Kinesiologist Assistant

Agency/Company: Movement Sport Clinic

Website: https://movementsportsclinic.ca/

Location: Calgary Tower

Schedule: 60-72 hours per term: TBD according to the Organization and the Practicum Student's schedule (5-6 hours / week for 12 weeks in Fall & Winter Terms / 10-12 hours / week for 6 weeks in Spring Term)

Terms Available: Spring

Number of Positions: 1

Organization Description:
Movement Sports Clinic is a forward-thinking rehabilitation and performance-oriented physiotherapy, health and wellness clinic assisting Calgarians in their quest to move well and live well. Our team provides innovative, evidence-informed care sensitive to clients' unique mobility needs and treatment goals.

Project Duties/Responsibilities:

- Observe, learn movement and mobility assessments of athletes
- Progress and regress rehabilitation exercises and programs as needed
- Work on video and virtual assessments of athletes in their training environments
- Assist in planning rehabilitation exercises and programs
- Complete case study of an athlete rehabilitation progressive program

Required Student Qualifications:

- Completion of or concurrently enrolled in KNES 372 and / or KNES 375

Apply to: Tyson Plesuk tyson@movementsportsclinic.ca

UCalgary Kinesiology Practicum Application

Placement: Movement Sports Clinic **Category:** Physiotherapy

Requirements:

- Students must be a current Faculty of Kinesiology undergraduate student in good academic standing with 60 units completed, including 30 units of KNES courses
- Students may participate in up to three different practicums (one per term) with no prior personal, work or volunteer relationship with the organization

☐ Yes ☐ No I have read and understood the criteria ☐ Yes ☐ No I meet the criteria for this practicum

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) associated with this practicum (work, volunteer or personal)?
   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:
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 (60-72 hours) <u>within</u> the term dates above, and spread evenly throughout the term (approx.5-6 hrs/wk in Fall and Winter / 10-12 hrs/wk in Spring)
- I will complete a mid-point and final evaluation for the practicum student
- I will provide sufficient supervision, and guidance during this practicum placement
- I will send any changes / updates to knespracticum@ucalgary.ca for approval / updating

☐ 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 WHEROF, the parties have duly executed this Agreement effective as of the day and year first written above.

Agency	**Student**
Signed:_____	Signed: _____
Print Name:_____	Print Name: _____
Title:_____	Date _____
Date: _____	

2500 University Drive N.W., Calgary, Alberta, Canada   T2N 1N4