KINESIOLOGY PRACTICUM DESCRIPTION

Practicum Position Title: Occupational Therapy Assistant

Agency/Company: Providence Children

Location: Six school locations in Calgary (Windsor Park, Midnapore, McKenzie, Hawkwood, Falconridge, Beddington)

Terms Available: Fall or Winter

Number of Positions: 1-2

Specified Schedule: Weekly hours must be completed within one day

Project Duties/Responsibilities:

Providence Children offers preschool for students with disabilities, providing educational and therapeutic services to preschool aged children with disabilities.

**Under strict supervision, the practicum student will:**

- Work alongside therapists and teachers in a school-based team.
- Assist with standardized tests performed by occupational therapists which focus on overall skills, balance, play skills, attention span, gross and fine motor skills, sensory processing ability, hand-eye coordination and bilateral coordination.
- Collect and set up gross motor materials such as balance beams and therapy balls for the classroom.
- Assist children with gross motor activities and exercises in a classroom setting or individually. Activities could include jumping, skipping, beating drums, push/pull activities.
- Assist with development of fine motor skills such as threading beads, drawing a line with a ruler, tying shoelaces, doing up buttons, cutting with scissors.
- Assist with improving bilateral coordination activities such as clapping hands or threading beads.
- Investigate creative ways of developing both gross and fine motor skills, and present to on-site supervisor at the end of the term.
- Prepare a variety of preschool activities based on the child’s goals and abilities.
- Participate in all school professional development and family programming.

Required Student Qualifications:

- Completion of KNES 367 (Adapted Physical Activity)
- Police Information Check with Vulnerability Sector

Assets:

- CPR & First Aid Certification

On-Site Supervisor: To Be Determined. Contact Margaret Jokuty (Vice President), mjokuty@providencechildren.com
### 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:**

#### 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:
- **Organization:** Providence Children

#### 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 WHEROOF, 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: ________________________________