

KINESIOLOGY PRACTICUM DESCRIPTION

Practicum Position Title: Kinesiology Assistant

Agency/Company: [United Active Living](#)

**Locations (2): Garrison Green, 3028 Don Ethell Blvd SW, Calgary, AB
Fish Creek, 51 Providence Blvd SE, Calgary, AB**

Terms Available: Fall, Winter, or Spring

Number of Positions: 2 (one per location)

Specified Schedule: Within Monday to Friday, 8:00am – 5:00pm

Project Duties/Responsibilities:

United Active Living is a leader in the development and implementation of programs and services that support residents to “Live Well in Our Community.” *United Active Living* integrates new and creative ways to enrich life experiences, provide growth and inspiration, and promote independence for individuals in the community.

Under strict supervision, the practicum student will:

- Assist with facilitating group exercises classes to increase range of motion, strength, endurance and decreasing the risk of falls for with persons with physical and cognitive impairments such as dementia, Alzheimer’s, stroke, joint replacements and musculoskeletal injuries.
- Assist in creating and implementing individualized home exercise programs and help execute the selected exercises. These will be based on resident goals, histories of injuries and medical background. Students will learn to adapt or progress these programs as the resident develops.
- Instruct residents on proper technique of exercises, proper posture and the correct ways to use gait aids (such as canes and walkers)
- Observe and help facilitate testing protocols used to measure balance, strength, flexibility and risk of falling (i.e. Berg Balance Scale, Seniors Fitness test, Balance Efficacy scale).

Required Student Qualifications:

- Completion of KNES 373 (Exercise Physiology)

Assets:

- KNES 367 (Adapted Physical Activity) considered an asset

On-Site Supervisor: To be determined. Contact Jenn Kitchen, jkitchen@unitedactiveliving.com

Kinesiology Practicum Application

Placement: [United Active Living](#)

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

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

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		
<input type="checkbox"/> Fall _____ (year)	<input type="checkbox"/> Winter _____ (year)	<input type="checkbox"/> 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 .		
<input type="checkbox"/> Yes <input type="checkbox"/> No	I have read and understood the University of Calgary's Code of Conduct.	
<input type="checkbox"/> Yes <input type="checkbox"/> 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:		
<ul style="list-style-type: none">• 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)	
_____	_____	
<input type="checkbox"/> I agree with the above-mentioned terms and conditions.		
Student's Signature:	Date:	

ON-SITE SUPERVISOR PORTION		
Name:	Organization: United Active Living	
Phone:	Email:	
As the On-Site Supervisor, I agree that:		
<ul style="list-style-type: none">• 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.		
<input type="checkbox"/> 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

Student

Signed: _____

Signed: _____

Print Name: _____

Print Name: _____

Title: _____

Date _____

Date: _____