

# **Athletic Training Student Agreement**

## ATHLETIC TRAINING STUDENT AGREEMENT

I, \_\_\_\_\_ (student's name) accept the following agreements as a condition of my acceptance as an Athletic Training Student at MARQUETTE UNIVERSITY.

Agreements (initial each):

\_\_\_\_ I agree to a minimum of 10 hours/week in the clinical athletic training setting.

\_\_\_\_ I agree to, under the direct supervision of a CI, travel with teams and, with prior approval, miss classes as the athletes do when necessary. I understand these will be excused absences and that I am responsible to make arrangements to get notes and complete class assignments.

\_\_\_\_ I agree to adjust my schedule to work weekends, holidays, or at other times when school may not be in session when under the direct supervision of a CI.

\_\_\_\_ I agree to abide by the Code of Ethics for Athletic Training Students and understand that failure to do so will subject me to disciplinary procedures.

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

Accepted by: \_\_\_\_\_ Date \_\_\_\_\_

(Signature of Program Director)