

2016-2017



Meade School District Sturgis Brown High School Sturgis Williams Middle School

Student Extra-Curricular Policies and Forms

Students are not eligible to participate in practice or games if the student does not have on file in the Activities Department Office all SDHSAA Forms, Parental Forms and Student Forms

**Meade School District 46-1
Extra-Curricular Student Policies**

Student Conduct

The Meade School District recognizes that all members of the student body are representatives of the school and encourages all students to participate in activities due to the benefits derived from such participation. Participation in student activities exposes students to greater public exposure and scrutiny, and students are expected and encouraged to bring credit rather than discredit to the school whose programs makes such participation possible. It shall therefore be the policy of the School District:

1. That student participation in student activities is a privilege rather than a right.
2. Those students who exercise the privilege of participation in student activities shall consequently be expected to exemplify high standards of behavior in and out of school.
3. Activity training rules and regulations cannot supercede School District policies concerning disciplinary regulations.
4. School attendance to participate in after school activities at Sturgis Brown High School is mandatory. All students who participate in school activities should be in a regular full day attendance in order to participate. To be eligible to participate in the contest of the day, the athlete must be present at least the afternoon of the day of the contest. This applies to practice sessions as well as games, meets, etc. It will be assumed that if any participant is too ill or is not in attendance in school, the student will not participate in any activity after school dismissal or in the evening of that same day. An exception to the rule may be allowed upon written notification from a physician, dentist, or parent conference with the building principal, assistant principal, or activities director permitting a student to participate.
5. Each sponsor or coach may institute additional rules of his/her own. These must have the approval of the building principal or activities director. Participants and parents must be fully informed in writing of all additional regulations.
6. See "Suspension," page 4

Interscholastic Activity Policy (SBHS Only)

It shall be the policy of the Board and administration that the rules of training, dress, and conduct shall be established for all activities of an inter-scholastic nature. These rules must be written by the coach/sponsors and agreed to by the principal and activities director. It shall also be policy of the Board and administration that all coaches and supervisors make no exceptions to enforcement of the rules. All reasonable means of supervision should be employed and all reports of rules violation rigorously, fairly, and impartially investigated.

Academic Eligibility Standards

Students in grades 9-12 are required to pass two (2) academic credits/semester) in order to participate in any extracurricular activity (includes club sports). If a student does not pass the required number of classes in each semester, he/she will not be eligible to participate the following semester in any extracurricular activity.

- Summer school credits earned can be applied to the previous semester (SDHSAA Eligibility) and/or any type of credit recovery approved by the administration.

Student Transportation On School Trips File: JHFE

The following constitutes the arrangements of the Meade School District concerning the transportation of students to and from extra-curricular school activities and school functions:

1. In most instances, District shall provide transportation to the students for all trips of more than ten (10) miles one way from the attendance center. This shall apply to all school functions where the attendance of the student is required, as well as extra-curricular activities. In most cases, the District will pay the cost of transportation, but in some cases, a student may be assessed a transportation fee. A student must travel on the school provided bus or van both ways. School personnel may release students to ride along with the custodial parent, legal guardian, or other persons authorized by the parent and school, with written request.
2. In the case of school activities or school functions which are less than ten (10) miles one way from the attendance center, the District will generally provide transportation, provided the entire class is being transported. If less than the entire class is being transported, or in the case of extra-curricular off-campus home events, the students may be asked to provide their own transportation or be transported by District personnel or in private vehicles driven by a licensed and insured adult.
3. No student may ride with another student to or from a school function or activity during the school day, unless the students are siblings.

Physicals and Medical History

- ~ Students **are not** eligible to participate in practice or games if the student does not have on file in the SBHS Activities Department Office. A signed physical examination that falls under the rules of the SDHSAA (Annual Athletic Physicals are required by the Meade School District 46-1). Those athletic physicals taken after April 1st can be used for the next school year.
- ~ A copy of the Student Participation Parent Approval Form must be submitted annually.
- ~ A signed Consent Form - Release of Medical Information (HIPAA).
- ~ Extra-Curricular Travel/Transportation Permission Form
- ~ SDHSAA Annual Parent and Student Consent Form
- ~ Pre-Participation Physical Evaluation History Form
- ~ A Concussion Fact Sheet for Athletes
- ~ A Concussion Fact Sheet for Parents

The use and/or possession of mood-altering chemicals such as alcohol, tobacco, drugs, or drug paraphernalia by participants of extra-curricular activities in Grades 9-12 are prohibited. This prohibition shall be in force all year including the summer months, weekends, and holidays. Training rule consequences will begin after any school suspension. Involvement in a law-breaking activity, other than a minor traffic violation, may result in suspension from any activities which the student is a participant.

SDCL 26-11-5.1

Provision for notice to school officials and parent or guardian by law enforcement agency where student suspected of violating state drug or alcohol laws or of threatening violence. Notwithstanding any other provision of law, a law enforcement agency may provide notice of an incident within its jurisdiction to public or nonpublic school officials and to the parent or guardian of a school student if the incident is one in which the agency has probable cause to believe the school student has violated any provision of state law involving alcohol, illegal drugs, firearms, or bomb threats, or has made any threat of violence relating to any school or its students, employees, or property. However, if there is a prolonged criminal investigation and revealing information would jeopardize a successful conclusion to the case, the law enforcement agency may provide the notice at some later appropriate time. The notice shall be in writing.

Consequences of Violations for Tobacco and Alcohol

First Violation:

The individual will be suspended for 10 school days of scheduled extra-curricular activities to include a minimum of two (2) contests in the activity in session or the next activity of participation (whichever is greatest) or the individual can perform ten (10) hours of community service that is approved by the administration and the suspension will be shortened to 5 school days of scheduled extra-curricular activities to include a minimum of one (1) contest in the activity in session or the next activity of participation. The suspension will occur when competition begins, not when practice begins. The participant must complete the entire season in the activity in which suspension is scheduled, or complete the entire season of a subsequent activity if the suspension is to be served during that activity.

*All community service hours must be completed prior to being reinstated for participation.

Parents or Guardians and the student will be notified either by letter, in-person, or both. A conference may be scheduled between participant, his/her parent/guardian, coach or advisor, and the activities director before future participation occurs.

Second Violation:

The individual will be suspended for 20 school days of scheduled extra-curricular activities to include a minimum of four contests in the activity in session or the next activity of participation (whichever is greatest) or the individual can perform twenty-five (25) hours of community service that is approved by the administration and the suspension will be shortened to 10 school days of scheduled extra-curricular activities to include a minimum of two (2) contests in the activity in session or the next activity of participation. The suspension will occur when competition begins, not when practice begins. The participant must complete the entire season in the activity in which suspension is scheduled, or complete the entire season of a subsequent activity if the suspension is to be served during that activity.

*All community service hours must be completed prior to being reinstated for participation.

Parents or Guardians and the student will be notified either by letter, in-person, or both. A conference may be scheduled between participant, his/her parent/guardian, coach or advisor, and the activities director before future participation occurs.

Third Violation:

After confirmation of a third violation, the student shall lose eligibility for one year from the date of notification of his/her third training rule violation. The one year suspension may be reduced to sixty (60) school days, but must include a minimum six (6) contests in the activity in session or the next activity of participation (whichever is greatest), if the person participates in an assessment with a certified chemical dependency counselor or completes an accredited intensive prevention or treatment program. The counseling will be at the expense of the student involved.

Fourth Violation:

After confirmation of the fourth violation, the student shall automatically lose eligibility for one (1) year from the date of notification by letter or conference. For any subsequent training rule violations (5th, 6th ...) the student shall automatically lose eligibility for one (1) year from the date of notification by letter or conference.

Only law enforcement, school officials, parents of the accused can bring training rule violation allegations, or admission by the individual(s) themselves, but the administration and/or School Resource Officer (SRO) reserves the right to investigate any training rule violation based on information received from outside law enforcement agencies and/or other outside sources if a signed document (outside source other than outside law enforcement agencies) is submitted to the administration concerning the allegations. After a proper investigation, a decision to suspend or not to suspend will be decided by the school administration. Any obligation to fulfill a penalty for a violation that is not fulfilled in the current school year will be carried over to the following school year. The Training Rules Committee shall make the decision on any situations that may involve a penalty. The committee shall consist of the activities director, two (2) head coaches, one (1) assistant coach, and the principal of the high school/middle school. The student will be provided due process as per district grievance policy.

Beginning with the 2015-2016 school year, all **Alcohol, Tobacco and Suspensions Due to Conduct and Other Circumstances**

will be cumulative in nature and the total number of violations will be based on high school years only – Grades 9-12 (see Violations above). Any violations for Controlled Substances and Marijuana (SDCL 13-32-9 and 13-32-9.2 will be handled separately due to the Meade School District deviation from the SDCL and not be cumulative in nature with Alcohol, Tobacco and Suspensions Due to Conduct and Other Circumstances.

*For every one (1) calendar year that an individual does not have a training violation – one (1) training rule violation will be removed from their record

Consequences of Violations for Controlled Substances and Marijuana

This consequence governs a participant adjudicated or convicted of possessing, selling, or using controlled substances or marijuana. It shall also govern a participant caught or observed possessing, selling or using controlled substances who has not been charged, adjudicated or convicted. These consequences of violations for controlled substances and marijuana is a deviation from SDCL 13-32-9 and 13-32-9.2 that went into effect July 1, 2014.

Any person adjudicated, convicted, the subject of an informal adjustment or court-approved juvenile diversion program, or the subject of a suspended imposition of sentence or suspended adjudication of delinquency for possession, use, or distribution of controlled drugs or substances or marijuana as defined in chapter 22-42, or for ingesting, inhaling, or otherwise taking into the body any substances as prohibited by 22-42-15, is ineligible to participate in any extracurricular activity at any secondary school accredited by the Department of Education for (1) one calendar year from the date of adjudication, conviction, diversion, or suspended imposition of sentence. The one (1) year suspension may be reduced to thirty (30) school days and a minimum of two (2) scheduled contests in the activity in session or the next activity of participation if the person participates in an assessment with a certified chemical dependency counselor or licensed addiction counselor. If the assessment indicates the need for a higher level of care, the student is required to complete the prescribed program before becoming eligible to participate in extracurricular activities. Upon a second adjudication, conviction, diversion, or suspended imposition of a sentence for possession, use, or distribution of controlled drugs, substances or marijuana as defined in chapter 22-42, or for ingesting, inhaling, or otherwise taking into the body any substance as prohibited by 22-42-15, by a court of competent jurisdiction, that person is ineligible to participate in any extracurricular activity at any secondary school accredited by the Department of education for one (1) year from the date of adjudication, conviction, diversion, or suspended imposition of sentence. The one (1) year may be reduced to sixty (60) school days and a minimum of six (6) scheduled contests in the activity in session or the next activity of participation if the person completes an accredited intensive prevention or treatment program. To count toward the minimum number of events the student must participate in the entire activity season and may not drop out or quit the activity to avoid suspension and the failure of a student to complete the entire activity season shall result in the student being ineligible for one year from the date of adjudication, conviction, the subject of an informal adjustment or court approved diversion program, or the subject of a suspended imposition of sentence or suspended adjudication of delinquency. A suspension that is not completed by the student during one (1) activity season shall carry over to the next activity season in which the student participates. Upon a third or subsequent adjudication, conviction, diversion, or suspended imposition of sentence for possession, use, or distribution of controlled drugs or substances or marijuana as defined in chapter 22-42, or for ingesting, inhaling, or otherwise taking into the body any substances as prohibited by 22-42-15, by a court of competent jurisdiction, that person is ineligible to participate in any extracurricular activity at any secondary school accredited by the Department of Education. Upon such a determination in any juvenile court proceeding, the Unified Judicial System shall give notice of that determination to the South Dakota High School Activities Association and the chief administrator of the school in which the person is participating in any extracurricular activity. The Unified Judicial System shall give notice to the chief administrators of secondary schools accredited by the Department of Education for any such determination in a court proceeding for any person eighteen to twenty-one years of age without regard to current status in school or involvement in extracurricular activities. The notice shall include name, date of birth, city of residence, and offense. The chief administrator shall give notice to the South Dakota High School Activities Association if any such person is participating in extracurricular activities.

Upon placement of the person in an informal adjustment or court-approved juvenile diversion program, the state's attorney who placed the person in that program shall give notice of that placement to the South Dakota High School Activities Association and chief administrator of the school in which the person is participating in any extracurricular activity.

As used in this section, the term, extracurricular activity, means any activity sanctioned by the South Dakota High School Activities Association and/or recognized by the Meade School District 46-1.

The Meade School District has adopted a deviation to the SDCL 13-32-9 and 13-32-9.2 that imposes consequences that are equal to or more strict than the consequences imposed by the State of South Dakota per SDCL 13-32-9.1

Definitions (based on MSD deviation from SDCL 13-32-9 and 13-32-9.2)

30 or 60 School Days may begin as soon as the individual is adjudicated and participates in an assessment with a certified chemical dependency counselor or is enrolled in an accredited intensive prevention or treatment program. The individual will not be eligible until he/she successfully completes the evaluation and/or intensive prevention or treatment program.

30 or 60 School Days may begin as soon as the administration has received written confirmation that the individual is participating in a drug/alcohol assessment and/or is enrolled in an accredited intensive prevention or treatment program.

Dependency Counselor must be approved by the Meade School District 46-1 administration. Student and/or parent/guardian are responsible for all costs associated with prevention/treatment program.

Accredited Intensive Prevention or Treatment Program must be approved by the Meade School District administration. Student and/or parent/guardian are responsible for all costs associated with prevention/treatment program.

Scheduled Extra-Curricular Activities is defined as those activities that do not meet during the regularly scheduled school hours (SBHS course). Example: SBHS students could participate in a scheduled Band/Choir concert, because that is part of their regular Band/Choir course, but could not participate in a SDHSAA Region Large Group Contest.

Community Service must be approved by the administration and it is up to the individual to document and show proof of community service hours prior to participation.

Suspensions Due to Conduct and Other Circumstances

Any student who is suspended from a team or from school for violation of team or school rules may not participate on another team during the same season or until suspension has been completed. Suspended students may not participate in a scheduled event, but may practice with the team with the approval of the coach/sponsor and the activities director. Length of suspension for the following offenses will be determined by the administration. Some offenses carry an automatic activity probation/suspension. Some of these violations include:

1. Possession, use, being under the influence, transfer or dispensing of any alcoholic beverages (prior to adjudication).
2. Use of tobacco products while on school premises or on a school-sponsored activity.
3. Vandalism to school property or vandalism to any property while on a school-sponsored activity.
4. Stealing while under the supervision of the school.
5. Possession, use, being under the influence, transfer, or dispensing of any substance prohibited by the Controlled Substance Act of 1971, or misuse of any drug, including transfer or dispensing (prior to adjudication).
6. Harassment
7. Weapons on school grounds.
8. Improper conduct in and out of school
9. Unexcused absences
10. Any action detrimental to the overall program
11. Any felony criminal offense.

Hazing or Initiation is Not Acceptable Behavior

It is of utmost importance on all teams, but especially teams with underclassman, that there are absolutely no hazing or so-called initiation rites. This is demeaning to all involved and is a most blatant form of harassment. Students found hazing, initiating, or harassing other students will be dealt with accordingly.

File: JFCE

Anti-Bullying/ Harassment of Students

Bullying and harassment of students are not tolerated by the Meade School District. The school district is committed to providing all students with a safe and civil school environment in which all members of the school community are treated with dignity and respect. Therefore, the school district prohibits harassment or bullying.

Bullying and harassment are repetitive, intentional, harmful behaviors initiated by one or more students and directed toward another student or students which create a hostile school environment including, but not limited to, the following:

- Physical – harmful action or threat of harmful action against another person;
- Verbal, Written or Electronic – threatening, unkind, abusive or hurtful communication to a person or about a person;
- Emotional – taunting or other conduct intended to upset, exclude, or embarrass a person;
- Sexual – conduct or communication based on actual or perceived trait or characteristic of a person because of gender and/or initiation of unwarranted or unwelcome sexual advances, or
- Racial – rejection, exclusion, isolation, or embarrassment of a person because of ethnicity.

This policy applies while students are on school property; while in school-owned or school-operated vehicles; while attending or engaged in school-sponsored activities, or while using school equipment.

If, after an investigation, a student is found to be in violation of this policy, the student shall be disciplined by appropriate measures up to, and including, suspension and expulsion.

Retaliation against a person because the person has filed a bullying or harassment complaint or assisted or participated in a harassment investigation or proceeding is prohibited. An individual who knowingly files a false harassment complaint and a person who gives false statements in an investigation shall be subject to discipline by appropriate measures, as shall a person who is found to have retaliated against another in violation of this policy. A student found to have retaliated or filed a false complaint in violation of this policy shall be subject to measures up to, and including, suspension and expulsion.

The building principal, school counselor or principal's designee will be responsible for investigating all complaints by students alleging bullying or harassment. All documentation associated with a complaint shall be maintained by the building principal.

Bullying/Harassment Investigation Procedures

Students who feel that they have been bullied or harassed should:

- Communicate to the perpetrator that the individual expects the behavior to stop, if the individual is comfortable doing so. If the individual wants assistance communicating with the perpetrator, the individual should ask a teacher, counselor, principal, or other adult in charge to help.
- If the bullying or harassment does not stop, or the individual does not feel comfortable confronting the perpetrator, the individual should:
 - tell a teacher, counselor, principal or other adult in charge; and
 - write down exactly what happened, keep a copy and give another copy to the teacher, counselor or principal including:
 - what, when and where it happened;
 - who was involved;
 - exactly what was said or what the perpetrator did;
 - witnesses to the bullying or harassment;
 - what the student said or did, either at the time or later;
 - how the student felt; and
 - how the perpetrator responded.
- The incident needs to be reported to the building principal as soon as possible.

Formal Complaint Procedure

An individual who believes that he/she has been harassed or bullied will notify the principal, school counselor, or principal-designee. The investigator may request that the individual complete the Harassment/Bullying Formal Complaint form and turn over evidence of the incident, including, but not limited to, letters, tapes, or pictures. Information received during the investigation is kept confidential to the extent possible. The principal or the alternate investigator, with permission from the principal, has the authority to initiate an investigation in the absence of a written complaint.

Investigative Procedure

The investigator will reasonably and promptly commence the investigation upon receipt of the complaint. The length of the investigation is governed by the facts and complexity of each individual case but should be completed within 30 calendar days of the complaint. The superintendent may approve an extension in special circumstances. The investigator will interview the complainant and the alleged perpetrator. The alleged perpetrator may file a written statement in response to the complaint. The investigator may also interview witnesses as deemed appropriate.

When a formal complaint has been filed, and upon completion of the investigation, the investigator will make written findings and conclusions.

Resolution of the Complaint

Following the completion of his/her own investigation or upon receipt of an alternate investigator's report, the principal may investigate further, if deemed necessary, and make a determination of any appropriate additional steps which may include discipline.

The principal will file a written report documenting any disciplinary action taken or any other action taken in response to the complaint. The remedial actions taken by the principal, including disciplinary action where appropriate, should be designed to prevent further bullying or harassment. The principal, or designee, will monitor the effectiveness of the remedial actions taken by contacting the complainant during the month following the investigation resolution. These contacts should be included in the documentation. If further remedial actions are necessary, the case shall remain open with ongoing monitoring and documentation. The complainant, the alleged perpetrator and the investigator will receive notice as to the conclusion of the investigation. The principal will maintain a log of all complaints, findings, and actions taken, and will maintain all documentation related to a complaint investigation during the duration of the perpetrator's school years.

Points to Remember in the Investigation

- Evidence uncovered in the investigation is confidential.
- Complaints must be taken seriously and promptly investigated.
- No retaliation will be taken against complainant/individuals involved in the investigation process.
- Retaliators will be disciplined up to and including suspension and expulsion.

Adopted March 13, 2012

Activity Travel Rules (see “Student Transportation on School Trips” File: JHFE)

1. Coaches/sponsors are required to accompany students to and from all school activities unless prior arrangements have been made and the activity director has been notified.
2. Students are required to travel by the mode of transportation provided by the school district to and from school activities unless prior arrangements have been made with the coach/sponsor and the activities director
3. Students/coaches/sponsors will dress appropriately for the activity they are attending. Some coaches will have a dress code for their activity.
4. The bus driver’s request should be recognized by all coaches/sponsors and in turn by the students.
5. The school has the administrative responsibility for the operation of school buses. The school district is not required to provide bus transportation to high school students. Students must act accordingly or their bus privileges could be revoked (see Bus Conduct form).

Guidelines for Travel During Inclement Weather

1. Practice: Practice will not be permitted on days that school has been canceled or has been released early because of weather related conditions unless per-approved by the administration.
2. Regular Scheduled Events: When school has been canceled or released early because of weather, no travel will be allowed unless pre-approved by the administration
3. State Event: At all times, we will consider the safety of the people traveling first.
4. Traveling Home: When leaving an event to come home, the decision will be left to the professional driver (Sturgis Bus Company) and the school administration.

Insurance for Interscholastic Activities

1. Participants are required to show proof of insurance or have a signed insurance waiver on file before practicing or competing in SBHS activities. SBHS strongly encourages all participants to have insurance before they participate in activities.
2. SBHS does have access to insurance for students at their request and expense.
3. Catastrophic Insurance is provided through our involvement with the SDHSAA.

Wednesday Night Practices

SBHS-There are no scheduled school activities after 6:30 PM on Wednesday night that involves students.

SWMS-There will be NO scheduled school activities for middle school.

Late Night Activities

The general guidelines to follow for student activities are that they should end before 10:00 PM on weeknights and before midnight on Friday and Saturday. Any exceptions to this should have prior administrative approval. This does not include traveling home from away games.

Holiday Practices

The Activities Director/Principal will approve all Holiday practices in advance. There will be no Sunday practices without prior approval of the administration.

Conflicts Between Activities

Conflict between activity programs and the attendance of a student at one or the other should be handled by the sponsors involved, and the student, well in advance of the conflict with no penalty to the student. If the sponsors and the students cannot satisfactorily solve the problem, then the activity office and building administration will be involved.

Fall, Winter and Spring Activity Cut-off Dates

Once a season has started, SBHS will institute the following cut-off dates in which a student may begin participation. Those cut-offs dates are the same for each season. The cut-off date to participate for a sport will be 1 week after the first contest, match, or meet. Coaches will have discretion to allow athletes to begin practice after the allowable cut-off dates, but it must be approved by the administration.

Lettering Policy (Minimum Standards) (Revised February 2015)

1. Each SBHS/SWMS athlete that wishes to earn a Varsity Letter must follow all the in season as well as out of season guidelines and requirements specified by the head coach of their respected sport of participation.
 - b. Summer Participate in a minimum of 20 workouts to achieve the Scooper level.
 - The student athlete wishing to letter the upcoming school year must document these workouts.
 - The following is a breakdown of the Leveling that will be used for summer workouts. (Summer Camp days will be counted as 2 total workouts)
 - These Levels will be used for an incentive based reward system for the athletes.
 - Scooper Level 20 workouts
 - Silver Scooper Level 30 workouts
 - Gold Scooper Level 40 workouts
 - Diamond Scooper Level 50 workouts

2. Each SBHS athlete will be required to participate in a minimum number of contests/games as defined by the coach.

Each SWMS athlete will be required to participate in a minimum of 50% of all scheduled varsity contests.

3. All Dual Sport Athletes (SDHSAA sanctioned vs SDHSAA sanctioned or SDHSAA sanctioned vs Club Sports) must commit to all SDHSAA sanctioned events (practice/games/contests) before committing to any other non-sanctioned practice/game/contest.
4. Must finish entire season. In case of injury/illness, the athlete must still be present at practice and games and follow all criteria to letter.
5. A senior that has been out all 4 years for the sport will letter if all minimum summer documentation has been satisfied and the athlete has shown commitment and dedication to the program as defined by the coach.
6. Coaches always have discretion on the lettering of an individual (SBHS/SWMS) if the above criteria has not been met - this is used in "special circumstances." In the case of "special circumstances", the coach and/or athlete may bring their request for a SBHS varsity letter to the "Lettering Committee." The "Lettering Committee" will approve/deny based on the case presented by the coach and/or athlete. The committee shall be composed of the following individuals:
 - a. HS Principal or designee
 - b. HS Activities Director
 - c. Strength and Conditioning Coordinator or designee
 - d. Head Coach requesting a committee review
 - e. Head Coach in another sport (designated by the administration)

EACH SDHSAA SANCTIONED ACTIVITY CAN HAVE ADDITIONAL SBHS LETTERING REQUIREMENTS, BUT ALL REQUIREMENTS 1-5 MUST BE SATISFIED BY ALL SDHSAA SANCTIONED ACTIVITIES PRIOR TO LETTERING. THOSE INDIVIDUALS THAT DO NOT MEET ALL NECESSARY REQUIREMENTS WILL RECEIVE A "CONDITIONAL LETTER." ONCE ALL MINIMUM REQUIREMENTS HAVE BEEN MET OR THE LETTERING COMMITTEE HAS APPROVED A REQUEST FOR DISCRETION TO BE USED - THE CONDITIONAL LETTER WILL BE CHANGED TO A SBHS VARSITY LETTER.

MEADE SCHOOL DISTRICT APPROVED CLUB SPORTS WILL FOLLOW MEADE SCHOOL DISTRICT POLICY IGDK*. "RECOGNITION WILL BE LIMITED TO STUDENTS IN GRADES 9-12. ONLY STUDENTS WHO ARE ENROLLED IN STURGIS BROWN HIGH SCHOOL WILL BE ALLOWED TO PARTICIPATE IN THE PROGRAM."

*SWMS students can earn a SBHS letter "S", but will not be given the actual letter until completion of the eighth grade. They will be given a "letter certificate" upon lettering in a specific sport (if all requirements above have been satisfied). All SBHS letters (excluding "conditional letters) can be used toward the "Honor Award White Letter."

Sturgis Brown High School/Sturgis Williams Middle School

1. By its nature, participation in interscholastic athletics includes risk of injury. Although serious injuries are not common in supervised school athletic programs, it is impossible to eliminate the risk. Participants have the responsibility to help reduce the chance of injury. Players must obey all safety rules, report all physical problems to their coach or school trainer, follow a proper conditioning program, and inspect their own equipment daily.
2. Each player is responsible for all equipment checked out to him/her. Personal items as well as practice gear should be taken home and washed each week.
3. Parents are cordially invited to attend practices or games.
4. A student is expected to attend all classes on his/her schedule the day of a contest and the next school day following the contest. To be eligible to participate in the contest of the day, the athlete must be present at least two (2) blocks of the day of the contest, unless the student has been excused from school attendance for such reasons as doctor's appointment, field trip, college visitation, etc. The purpose of this clause is to keep a student from participating when he/she is ill. The school principal or activities director can excuse an individual in conference with that person's parents/guardians.
 - * An open-block does count as part of the two (2) blocks in attendance
5. Team members are expected to be present at all practices, team meetings, contests, and special occasions unless excused by the head coach
6. All letter awards shall be based on attendance, attitude, and achievement. Specific requirements for each sport are determined by the coach and approved by the activities director. Such requirements will be reviewed with the participants at the beginning of the season (See page 5 – Minimum Lettering Standards)
7. All team members will travel to and from out-of-town contests by means of the transportation provided or arranged by the school. The only exception would be the release of cheerleaders/athletes to their custodial parent, legal guardian, or other persons authorized by the parent and school, with written request.
8. All athletes are reminded that you are judged by your dress, manners, conduct and sportsmanship as well as your skills in athletics.
9. Sturgis Brown High School & Sturgis Williams Middle School are not responsible for items that are stolen from lockers. It is the responsibility of the student-athlete to lock all personal and school issued items in their locker before, during and after all practices/contests.

The following pages, along with your son / daughter's physical and HIPPA Form must be signed and turned into the SBHS/SWMS Activities Department Office prior to your son /daughter's first practice.

Student Participation Parent Approval Form

2016-2017

“I hereby give my consent for the above named student to represent Sturgis Brown High School in athletic activities and other organizations sponsored by Sturgis Brown High School or Sturgis Williams Middle School and/ or the South Dakota High School Activities Association. I authorize the school to obtain any emergency medical care that may become reasonably necessary for the student in the course of such activities. I also agree not to hold the school or anyone acting in its behalf responsible for any injury occurring to the above student in the course of such activity or such travel.”

Parent/Guardian Signature

Parent/Guardian Signature

Date

Insurance

The Meade School District does not provide any type of health or accident insurance for injuries incurred by your child at school.

As a service to students and their families, the Meade School District is making available a student accident insurance plan for your child at a very nominal cost. The district offers this program because of trends in rising family health and dental insurance costs, increased deductibles, co-payments, or lack of health or dental insurance coverage.

REASONS TO PURCHASE THIS COVERAGE:

1. Deductible and co-pays in your health plan. Many health plans have increased the amount of out-of-pocket expenses.
2. No insurance.

This plan will provide benefits for medical expenses incurred because of an accident. If you have other insurance, benefits can be applied to your deductible or co-pays. If you have no other insurance this will become your primary accident plan.

PURCHASE COVERAGE ON-LINE (with Visa/Mastercard) at www.1stAgency.com and then follow directions at “Find Your School.”

PRINT PROCEDURE PDF FROM SCHOOL DISTRICT PAGE at www.1stAgency.com and pay with check or money order.

All questions regarding this coverage should be directed to First Agency, Inc. at (269) 381-6630, or toll free at (800) 243-6298.

It is the responsibility of the parent/guardian of each student to make sure that he/she has one or more of the following plans in force:

- (1) Individual or Group Health/Accident Insurance
- (2) Student Accident Insurance
- (3) Special Insurance for football only

Parental Insurance Waiver

Please initial one of the following boxes below:

- _____ We do not plan to buy school student insurance. We have adequate insurance to protect our son/daughter in case of an accident.
- _____ We plan on purchasing school student insurance at our expense.

Parent’s Signature: _____ Date: _____

Emergency Medical Authorization

Student Name	Date of Birth		
Address	City	State	Zip Code
Telephone Number	Parent/Guardian Name		
	<div style="background-color: #cccccc; width: 100%; height: 20px; margin-bottom: 5px;"></div> Parent/Guardian Signature		
Neighbor/Alternate Person	Telephone Number		

A parent(s) signature (previous page) allows the coach/sponsor to authorize emergency medical treatment while on a school-sponsored activity and hereby appoint said employee to act in behalf in securing necessary medical services from any duly licensed medical provider.

In the event of reasonable attempts to contact me,
_____, at _____ or
Parent/Guardian Name Telephone Number
_____, at _____ have been
Name of Alternate Telephone Number

unsuccessful, I hereby give my consent for the admission of medical treatment deemed necessary.

This authorization does not cover major surgery unless the medical opinions of two licensed physicians concur in the necessity for such surgery are obtained before surgery is performed.

Facts concerning the child's medical history including allergies, medications being taken, and any physical impairments to which a physician should be alerted:

I do not give my consent for emergency medical treatment of my child. In the event of illness or injury requiring emergency treatment, I wish the school authorities to take no action or to:

Parent/Guardian Signature

Date

Bus Conduct

The school has the administrative responsibility for the operation of school buses. Be reminded: The Meade School District 46-1 is not required to provide bus transportation to high school aged students. Act accordingly or lose your privilege. The following is information relative to the operation and control on buses:

1. The bus driver is the official representative of the school and has the full authority to control pupils on the bus and any violation of the rules will mean the cancellation of bus privileges. Seats may be assigned to any or all students.
2. Absolutely no tobacco use on the bus or in the general area of the bus.
3. Rowdiness is not permitted; pushing, crowding, loud talk or unnecessary noise or other distractions are not to be tolerated.
4. The bus driver is responsible for the safety and welfare of the pupils in the bus, and should never be bothered in any way, which would interfere with responsible, safe driving.
5. Loading pupils will be done at regular bus stops and at loading zones only. Do not rush to the bus: wait until the bus has completely stopped. Younger students will be loaded first.
6. Pupils must be on time at the designated bus stops. The bus cannot wait beyond its regular time schedule for tardy pupils.
7. Pupils will assist the driver in keeping the interior of the bus clean, sanitary, and in orderly condition. Pupils must not throw waste paper or rubbish on the floor or out of the windows of the bus.
8. Pupils will not open or close the windows without permission of the bus driver and should report to the driver any damage occurring to the bus.
9. Pupils must wait for the signal from the driver to cross a road, then cross promptly. The crossing should be made approximately 10 feet in front of the bus, in full view of the driver.
10. Pupils desiring to leave the bus at other than their designated bus stop must present the driver with written permission from their parents.
11. Pupils will be courteous to the driver, each other, and the general public.
12. Violations of bus regulations by a student are to be reported by the driver to the parent, bus contractor, and principal. Violations of bus rules may cause the student to lose the bus as means of transportation.
13. High School students receiving bus conduct slips may receive a warning, suspension, or the revoking of privileges depending upon the severity of the situation.
14. Students in town may board the bus at the Middle School.
15. Students at the Middle School waiting to change buses are to remain at the Middle School and not cross the street.
16. Buses will occasionally stop for a vandalism check.
17. Violation(s) of sufficient magnitude will result in immediate and permanent suspension.
18. Activity Trips – The coach or advisor may release students to their parents or guardian. Notes from parents/guardians giving permission for their student(s) to ride with someone else will not be accepted.
19. Any endangerment of a bus or its passengers will result in suspension or expulsion. Careless driving or harassing a bus by any other drivers is included. Taunting or teasing a driver in another vehicle while riding in a bus will result in suspension or expulsion.
20. Any student riding the after school activities bus to Piedmont must have a bus pass from the school.
21. Any student on a sports activity bus found using alcohol will be reported to the authorities.
22. All students riding a school bus/motor coach for an activity must stay seated and facing forward for their own protection and safety. This is not the bus driver’s responsibility, it is the coaches.
23. On activity trips with more than one coach, one coach must sit up in front of the bus and one coach must sit in the back to keep control of the students.
- 24.

I have received a copy of the 2016-2017 Meade School District 46-1 Extra-Curricular Student Policies and have reviewed the contents. I agree to abide by the rules, principles, and regulations and other information contained within the policy.

Student Printed Name	Student Signature	Date
Parent/Guardian Printed Name	Parent/Guardian Signature	Date
Parent/Guardian Printed Name	Parent/Guardian Signature	Date

CONSENT FOR RELEASE OF MEDICAL INFORMATION FORM (HIPAA)

Student's Name _____ Date of Birth: _____

1. I authorize the use or disclosure of the above named individual's health information including the Initial and Interim Pre-Participation History and Physical Exam information pertaining to a student's ability to participate in South Dakota High School Activities Association sponsored activities. Such disclosure may be made by any Health Care Provider generating or maintaining such information.
2. The information identified above may be used by or disclosed to the school nurse, athletic trainer, coaches, medical providers and other school personnel involved in the care of this student.
3. This information for which I am authorizing disclosure will be used for the purpose of determining the student's eligibility to participate in extracurricular activities, any limitations on such participation and any treatment needs of the student.
4. I understand that I have a right to revoke this authorization at any time. I understand that if I revoke this authorization, I must do so in writing and present my written revocation to the school administration. I understand that the revocation will not apply to information that has already been released in response to this authorization. I understand that the revocation will not apply to my insurance company when the law provides my insurer with the right to contest a claim under my policy.
5. This authorization will expire on July 1, 2017.
6. I understand that once the above information is disclosed, it may be re-disclosed by the recipient and the information may not be protected by federal privacy laws or regulations.
7. I understand authorizing the use or disclosure of the information identified above is voluntary. However, a student's eligibility to participate in extracurricular activities depends on such authorization. I need not sign this form to ensure healthcare treatment.

Parent/Guardian Signature

Date

This form must be completed annually and must be available for inspection at the School

Revised 7/16

PHYS - #5

Extracurricular Travel/Transportation Permission Form (SBHS Only)

***Middle school participants do not need to fill out this form.**

I hereby give _____ permission to attend extracurricular home events (scheduled activities) _____ (student full name) that are held off campus away from Sturgis Brown High School.

_____ I grant permission for this student to transport him/herself
(parent initial) in a personal vehicle for this purpose. I understand that all vehicle liability is assumed by the student.

No student may ride with another student to or from a school function or activity during the school day, unless the students are siblings (*Student Transportation on School Trips File: JHFE*)

Parent/Guardian Printed Name

Parent/Guardian Signature

Date

**SOUTH DAKOTA HIGH SCHOOL ACTIVITIES ASSOCIATION
ANNUAL PARENT AND STUDENT CONSENT FORM**

School Year: 2016-2017 Name of School: _____

Name of Student: _____

Date of Birth: _____ Place of Birth: _____

The Parent and Student hereby:

1. Understand and agree that participation in SDHSAA sponsored activities is voluntary on the part of the student and is considered a privilege.
2. Understand and agree that (a) by this Consent Form the SDHSAA has provided notification to the parent and student of the existence of potential dangers associated with athletic participation; (b) participation in any athletic activity may involve injury of some type; (c) the severity of such injuries can range from minor cuts, bruises, sprains, and muscle strains to more serious injuries such as injuries to the body's bones, joints, ligaments, tendons, or muscles. Catastrophic injuries to the head, neck and spinal cord and concussions may also occur. On rare occasions, injuries so severe as to result in total disability, paralysis and death; and (d) even with the best coaching, use of the best protective equipment, and strict observance of rules, injuries are still a possibility.
3. Consent and agree to participation of the student in SDHSAA activities subject to all SDHSAA bylaws and rules interpretations for participation in SDHSAA sponsored activities, and the activities rules of the SDHSAA member school for which the student is participating; and
4. Consent and agree that personally identifiable directory information may be disclosed about the student as a result of his/her participation in SDHSAA sponsored activities. Such directory information may include, but is not limited to, the student's photograph, name, grade level, height, weight, and participation in officially recognized activities and sports. *If I do not wish to have any or all such information disclosed, I must notify the above mentioned high school, in writing, of our refusal to allow disclosure of any or all such information prior to the student's participation in sponsored activities.*

I acknowledge that I have read paragraphs one (1) through four (4) above, understand and agree to the terms thereof, including the warning of potential risk of injury inherent in participating in activities.

DATED this _____ day of _____, 20_____

Name of Student (Print Name) Student Signature

I am the student's parent/guardian. I acknowledge that I have read paragraphs (1) through (4) above, understand and agree to the terms thereof, including the warning of potential risk of injury inherent in participation in athletic activities. I hereby give my permission for _____ (student's name) to practice and compete for the above named high school in activities approved by the SDHSAA.

DATED this _____ day of _____, 20_____

Parent/Guardian (Print Name) Parent/Guardian Signature

**THIS FORM MUST BE COMPLETED ANNUALLY AND MUST BE AVAILABLE FOR
INSPECTION AT THE SCHOOL**

PREPARTICIPATION PHYSICAL EVALUATION HISTORY FORM

(Note: This form is to be filled out by the patient and parent prior to seeing the physician. The physician should keep this form in the chart.)

Date of Exam _____
 Name _____ Date of birth _____
 Sex _____ Age _____ Grade _____ School _____ Sport(s) _____

Medicines and Allergies: Please list all of the prescription and over-the-counter medicines and supplements (herbal and nutritional) that you are currently taking

Do you have any allergies? Yes No If yes, please identify specific allergy below.

Medicines Pollens Food Stinging Insects

Explain "Yes" answers below. Circle questions you don't know the answers to.

GENERAL QUESTIONS	Yes	No
1. Has a doctor ever denied or restricted your participation in sports for any reason?		
2. Do you have any ongoing medical conditions? If so, please identify below: <input type="checkbox"/> Asthma <input type="checkbox"/> Anemia <input type="checkbox"/> Diabetes <input type="checkbox"/> Infections Other: _____		
3. Have you ever spent the night in the hospital?		
4. Have you ever had surgery?		
HEART HEALTH QUESTIONS ABOUT YOU	Yes	No
5. Have you ever passed out or nearly passed out DURING or AFTER exercise?		
6. Have you ever had discomfort, pain, tightness, or pressure in your chest during exercise?		
7. Does your heart ever race or skip beats (irregular beats) during exercise?		
8. Has a doctor ever told you that you have any heart problems? If so, check all that apply: <input type="checkbox"/> High blood pressure <input type="checkbox"/> A heart murmur <input type="checkbox"/> High cholesterol <input type="checkbox"/> A heart infection <input type="checkbox"/> Kawasaki disease Other: _____		
9. Has a doctor ever ordered a test for your heart? (For example, ECG/EKG, echocardiogram)		
10. Do you get lightheaded or feel more short of breath than expected during exercise?		
11. Have you ever had an unexplained seizure?		
12. Do you get more tired or short of breath more quickly than your friends during exercise?		
HEART HEALTH QUESTIONS ABOUT YOUR FAMILY	Yes	No
13. Has any family member or relative died of heart problems or had an unexpected or unexplained sudden death before age 50 (including drowning, unexplained car accident, or sudden infant death syndrome)?		
14. Does anyone in your family have hypertrophic cardiomyopathy, Marfan syndrome, arrhythmogenic right ventricular cardiomyopathy, long QT syndrome, short QT syndrome, Brugada syndrome, or catecholaminergic polymorphic ventricular tachycardia?		
15. Does anyone in your family have a heart problem, pacemaker, or implanted defibrillator?		
16. Has anyone in your family had unexplained fainting, unexplained seizures, or near drowning?		
BONE AND JOINT QUESTIONS	Yes	No
17. Have you ever had an injury to a bone, muscle, ligament, or tendon that caused you to miss a practice or a game?		
18. Have you ever had any broken or fractured bones or dislocated joints?		
19. Have you ever had an injury that required x-rays, MRI, CT scan, injections, therapy, a brace, a cast, or crutches?		
20. Have you ever had a stress fracture?		
21. Have you ever been told that you have or have you had an x-ray for neck instability or atlantoaxial instability? (Down syndrome or dwarfism)		
22. Do you regularly use a brace, orthotics, or other assistive device?		
23. Do you have a bone, muscle, or joint injury that bothers you?		
24. Do any of your joints become painful, swollen, feel warm, or look red?		
25. Do you have any history of juvenile arthritis or connective tissue disease?		

MEDICAL QUESTIONS	Yes	No
26. Do you cough, wheeze, or have difficulty breathing during or after exercise?		
27. Have you ever used an inhaler or taken asthma medicine?		
28. Is there anyone in your family who has asthma?		
29. Were you born without or are you missing a kidney, an eye, a testicle (males), your spleen, or any other organ?		
30. Do you have groin pain or a painful bulge or hernia in the groin area?		
31. Have you had infectious mononucleosis (mono) within the last month?		
32. Do you have any rashes, pressure sores, or other skin problems?		
33. Have you had a herpes or MRSA skin infection?		
34. Have you ever had a head injury or concussion?		
35. Have you ever had a hit or blow to the head that caused confusion, prolonged headache, or memory problems?		
36. Do you have a history of seizure disorder?		
37. Do you have headaches with exercise?		
38. Have you ever had numbness, tingling, or weakness in your arms or legs after being hit or falling?		
39. Have you ever been unable to move your arms or legs after being hit or falling?		
40. Have you ever become ill while exercising in the heat?		
41. Do you get frequent muscle cramps when exercising?		
42. Do you or someone in your family have sickle cell trait or disease?		
43. Have you had any problems with your eyes or vision?		
44. Have you had any eye injuries?		
45. Do you wear glasses or contact lenses?		
46. Do you wear protective eyewear, such as goggles or a face shield?		
47. Do you worry about your weight?		
48. Are you trying to or has anyone recommended that you gain or lose weight?		
49. Are you on a special diet or do you avoid certain types of foods?		
50. Have you ever had an eating disorder?		
51. Do you have any concerns that you would like to discuss with a doctor?		
FEMALES ONLY		
52. Have you ever had a menstrual period?		
53. How old were you when you had your first menstrual period?		
54. How many periods have you had in the last 12 months?		

Explain "yes" answers here

I hereby state that, to the best of my knowledge, my answers to the above questions are complete and correct.

Signature of athlete _____ Signature of parent/guardian _____ Date _____

©2010 American Academy of Family Physicians, American Academy of Pediatrics, American College of Sports Medicine, American Medical Society for Sports Medicine, American Orthopaedic Society for Sports Medicine, and American Osteopathic Academy of Sports Medicine. Permission is granted to reprint for noncommercial, educational purposes with acknowledgment.

CONCUSSION FACT SHEET FOR ATHLETES

What is a concussion?

A concussion is a brain injury that:

- Is caused by a bump, blow, or jolt to the head or body
- Can change the way your brain normally works
- Can occur during practices or games in any sport or recreational activity
- Can happen even if you haven't been knocked out
- Can be serious even if you've just been "dinged" or "had your bell rung"

All concussions are serious. A concussion can affect your ability to do schoolwork and other activities (such as playing video games, working on a computer, studying, driving, or exercising). Most people with a concussion get better, but it is important to give your brain time to heal.

What are the symptoms of a concussion?

You can't see a concussion, but you might notice one or more of the symptoms listed below or that you "don't feel right" soon after, a few days after, or even weeks after the injury.

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Bothered by light or noise
- Feeling sluggish, hazy, foggy, or groggy
- Difficulty paying attention
- Memory problems
- Confusion

What should I do if I think I have a concussion?

- **Tell your coaches and your parents.** Never ignore a bump or blow to the head even if you feel fine. Also, tell your coach right away if you think you have a concussion or if one of your teammates might have a concussion.
- **Get a medical check-up.** A doctor or other health care professional can tell if you have a concussion and when it is OK to return to play.
- **Give yourself time to get better.** If you have a concussion, your brain needs time to heal. While your brain is still healing, you are much more likely to have another concussion. Repeat concussions can increase the time it takes for you to recover and may cause more damage to your brain. It is important to rest and not return to play until you get the OK from your health care professional that you are symptom-free.

How can I prevent a concussion?

Every sport is different, but there are steps you can take to protect yourself.

- Use the proper sports equipment, including personal protective equipment. In order for equipment to protect you, it must be:
 - The right equipment for the game, position, or activity
 - Worn correctly and the correct size and fit
 - Used every time you play or practice
- Follow your coach's rules for safety and the rules of the sport
- Practice good sportsmanship at all times

It's better to miss one game than the whole season.

Student's Name (please print) _____ Date: _____

Student's Signature: _____ Date: _____

Parent/Guardian's Signature: _____ Date: _____

THIS FORM MUST BE SIGNED ANNUALLY AND MUST BE AVAILABLE FOR INSPECTION AT THE SCHOOL

CONCUSSION FACT SHEET FOR PARENTS

What is a concussion?

A concussion is a brain injury. Concussions are caused by a bump, blow, or jolt to the head or body. Even or what seems to be a mild bump or blow to the head can be serious.

What are the signs and symptoms?

You can't see a concussion, Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days after the injury. If your teen reports, one or more symptoms of concussion listed below, or if you notice the symptoms yourself, keep your teen out of play and seek medical attention right away.

Signs Observed By Parents or Guardians	Symptoms Reported by Athlete
<ul style="list-style-type: none"> • Appears dazed or stunned • Is confused about assignment or position • Forgets an instruction • Is unsure of game, score, or opponent • Moves clumsily • Answers questions slowly • Loses consciousness (even briefly) • Shows mood, behavior, or personality changes • Can't recall events prior to hit or fall • Can't recall events after hit or fall 	<ul style="list-style-type: none"> • Headache or "pressure" in head • Nausea or vomiting • Balance problems or dizziness • Double or blurry vision • Sensitivity to light or noise • Feeling sluggish, hazy, foggy, or groggy • Concentration or memory problems • Confusion • Just not "feeling right" or is "feeling down"

How can you help your teen prevent a concussion?

Every sport is different, but there are steps your teens can take to protect themselves from concussion and other injuries.

- Make sure they wear the right protective equipment for their activity. It should fit properly, be well maintained, and be worn consistently and correctly.
- Ensure that they follow their coaches' rules for safety and the rules of the sport
- Encourage them to practice good sportsmanship at all times.

What should you do if you think your teen has a concussion?

1. **Keep your teen out of play.** If your teen has a concussion, her/his brain needs time to heal. Don't let your teen return to play the day of the injury and until a health care professional, experienced in evaluating for concussion, says your teen is symptom-free and it's OK to return to play. A repeat concussion that occurs before the brain recovers from the first – usually within a short period of time (hours, days, or weeks) – can slow recovery or increase the likelihood of having long-term problems. In rare cases, repeat concussions can result in edema (brain swelling), permanent brain damage, and even death.
2. **Seek medical attention right away.** A health care professional experienced in evaluating for concussion will be able to decide how serious the concussion is and when it is safe for your teen to return to sports.
3. **Teach your teen that it's not smart to play with a concussion.** Rest is key after a concussion. Sometimes athletes wrongly believe that it shows strength and courage to play injured. Discourage others from pressuring injured athletes to play. Don't let your teen convince you that s/he's "just fine".
4. **Tell all of your teen's coaches and the student's school nurse about ANY concussion.** Coaches, school nurses, and other school staff should know if your teen has ever had a concussion. Your teen may need to limit activities while s/he is recovering from a concussion. Things such as studying, driving, working on a computer, playing video games, or exercising may cause concussion symptoms to reappear or get worse. Talk to your health care professional, as well as your teen's coaches, school nurse, and teachers. If needed, they can help adjust your teen's school activities during her/his recovery.

Parent/Guardian's Name (Please print) _____ Date _____

Parent/Guardian's Signature _____ Date _____

THIS FORM MUST BE SIGNED ANNUALLY AND MUST BE AVAILABLE FOR INSPECTION AT THE SCHOOL



SOUTH DAKOTA HIGH SCHOOL
ACTIVITIES ASSOCIATION
PHYSICAL EXAMINATION FORM

Date Exam Expires: _____
Check Appropriate Physical Exam Term:
Annual Biennial Triennial

NAME _____ GRADE _____ DATE OF BIRTH _____
CHECK ONE: MALE FEMALE (2016-17 School Year)

1. Blood pressure (sitting) ____/____ Repeat in 5 minutes, if elevated ____/____.
2. Height _____
3. Weight _____
4. Vision 20/____(L) 20/____(R)
5. Head _____
6. Mouth (dentures, braces?) _____
7. Eyes (contacts?) _____
8. Chest/lung _____
9. Heart
a. Heart sounds _____
b. Murmurs _____
c. pulse (rad. vs fem.) _____
d. rhythm _____
10. Abdomen
a. liver or spleen _____
b. masses _____
11. Genitalia (males only)
a. hernias _____
b. testes _____
12. Orthopedic
a. cervical spine _____
b. shoulder shrug _____
c. deltoid _____
d. arms/elbow _____
e. hands _____
f. hips _____
g. knees _____
h. ankles _____
i. Scoliosis _____

SPORTS PARTICIPATION RECOMMENDED FOR:

- ____ Cleared for ALL (collision, contact/endurance sports, and other sports)
____ Cleared only for contact/endurance sports and other sports
____ Cleared only for other sports

Definition: [Collision=Football and Wrestling]; [Contact/Endurance Sports=Basketball, Cross Country, Gymnastics, Soccer, Tennis, Track, Volleyball, Competitive Cheer and Competitive Dance]; [Other Sports=Golf]

- ____ Cleared for ALL, but with recommendations for further evaluation or treatment for _____
____ Above clearance to be granted only after _____
____ Clearance cannot be given at this time because _____

NAME OF EXAMINER (PRINT) _____ DATE _____, 20____

SIGNATURE OF EXAMINER _____

NOTE: The following licensed medical personnel are qualified to perform the examination and certify the health of the student athlete: Doctor of Medicine, Doctor of Osteopathy, Doctor of Chiropractic, licensed Physician Assistant and licensed Nurse Practitioner.