

# **WALLACE COMMUNITY COLLEGE ATHLETIC HANDBOOK**

**2014-2015**



## 2014-2015 HANDBOOK FOR WCC STUDENT-ATHLETES

### WELCOME TO THE WALLACE COMMUNITY COLLEGE ATHLETIC PROGRAM...

As a representative of the College and the WCC Athletic family, you will be in the spotlight and have the opportunity to enjoy the prestige a collegiate **student-athlete** experiences on campus, in the community, and throughout the state. With this recognition comes additional responsibilities and obligations that other students might not have.

Often the action and conduct of one **student-athlete** influences the attitude and thoughts of the general public about all of our **student-athletes**. Consequently, the general impression you as an individual create, on and off the field, is important. It can be good or bad and greatly affect all of your fellow **student-athletes**, our athletic program, and most importantly, Wallace Community College. Remember you are representing more than yourself at all times; you are representing your teammates, coaches, program, and a wonderful College.

This handbook has been prepared so **student-athletes** at Wallace Community College can become acquainted with the procedures and general regulations established by the College, the Alabama Community College Conference (ACCC), and the National Junior College Athletic Association (NJCAA). **Student-athletes** are expected to become familiar with all policies and procedures outlined in this handbook and abide by each one, understanding penalties will be imposed if a **student-athlete** fails to comply.

Our College personnel are here to help you, as with any student, excel in the classroom first, then on the athletic field. Please let us know what we can do to better serve your needs as you participate as a Wallace Community College **student-athlete**.

Let's have a great year, and Go Gov's!

Mackey Sasser  
Wallace Community College Athletic Director

## **ATHLETIC DEPARTMENT MISSION STATEMENT**

The mission of the Wallace Community College Athletic Department is to provide programs that develop character and integrity of **student-athletes** in their academic, athletic and personal quest for excellence. Our program's mission relates directly to the College's purposes in developing human potential, transmitting knowledge, cultivating responsible citizenship and facilitating life-long learning. The Athletic Department strives to provide adequate physical facilities and resources to promote pride among **student-athletes** and fans. The Department will operate with fiscal responsibility and compliance under the rules, policies and procedures of Wallace Community College, the Alabama Community College Conference (ACCC) and the National Junior College Athletic Association (NJCAA).

The Department is also committed to the following:

- Ensuring that intercollegiate competition is an integral part of the total educational offering under the control of those responsible for the administration of the institution;
- Encouraging the broadest possible student involvement in its competitive programs;
- Maintaining high ethical standards through commitment to the principles of self-monitoring and self-reporting; and
- Evaluating the competitive program in terms of the educational purpose of the College.

## **ATHLETIC DEPARTMENT GOALS AND OBJECTIVES**

### **GOALS**

Wallace Community College is committed to providing quality educational experiences, and to offering intercollegiate athletic programs designed to foster the personal growth of each student without regard to race, sex, age, income, religion, disability, or occupation. These programs encourage individual and team achievement and strive to enhance the academic success, social development, and physical and emotional well-being of **student-athletes**.

### **OBJECTIVES**

- To encourage and stress the importance of academic success (**student first – athlete second**).
- To integrate physical and emotional development, and scholastic achievement.

- To provide opportunities for students to learn and practice leadership and interpersonal skills.
- To identify and recognize individual physical ability and academic achievement.

## **ATHLETIC DEPARTMENT ACTIVITIES AND PROCEDURES**

### **ELIGIBILITY**

- Ensure that athletes maintain a minimum GPA of 1.75 for the first season of play, 2.00 (minimum) every semester thereafter, meet all other NJCAA and ACCC rules and regulations and are enrolled in at least 12 credit hours per semester (Wallace Community College recommends 15 credits) in order to participate.
- Make periodic checks throughout the semester via progress reports (to be completed at least three times a semester) to ensure athletes are maintaining their grades at or above acceptable levels and are attending classes. Progress reports should be completed by instructors and returned to the head coach. **Failure to return or forging a progress report will result in immediate dismissal from the team.**
- Require students to seek academic assistance if grades fall below required levels, or if they are experiencing difficulties. Head coach may choose to remove **student-athlete** from athletic participation until grades are brought up to an acceptable level.

### **LEADERSHIP SKILLS**

- Promote the development of leadership and management skills by encouraging athletes to assume leadership roles within the different team sports.
- Involve athletes in team sports that require them to be cooperative and to develop their interpersonal skills in order to achieve both team and individual success.
- Require teams to participate in community service projects at least once a semester, promoting vital servant-leadership traits necessary for personal and professional success.

### **RECOGNITION**

- Allow athletes who exhibit the best abilities AND attitudes to receive the greatest amount of playing time in athletic competition.
- Provide recognition and awards to the best athletes and scholars.
- Distribute material on the athletic ability of all athletes in order to enhance their opportunities for continuing their education and career after graduating from Wallace Community College.

## **ORIENTATION**

- All **student-athletes** and parents, including managers and walk-ons, are required to attend the Department's annual orientation meeting. A written record is kept of those in attendance. The meeting will cover a variety of topics and services specific to **student-athletes**. Those with extenuating circumstances unable to make the meeting, as determined by the sport's head coach, Athletic Director, and the College's athletic administrator, are required to have a make-up meeting with Athletic Director before the fall semester begins.

## **ATHLETIC EVALUATION PROCEDURES BY INSTITUTION**

Wallace Community College will annually evaluate the Athletic Department by utilizing the following evaluation tools:

- Determine the retention rates of **student-athletes**.
- Identify graduation rates of **student-athletes**.
- Determine the number of scholarships awarded to Wallace Community College **student-athletes** by four-year institutions.
- Determine how many **student-athletes** participate in other campus activities/organizations.
- Comparison of GPA of **student-athletes** to GPA of general student population (full-time students).
- Identify **student-athletes** of All-American and/or All-Academic status.
- Annual evaluation of coaches by Athletic Director.
- Program Evaluation taken from student satisfaction surveys, as directly related to athletics.

The College's athletic administrator will use feedback from these mechanisms to recommend changes to the Department's policies and procedures.

## **ATHLETIC DEPARTMENT POLICIES AND PROCEDURES**

In matters of recruiting, admission, financial aid, and continuing eligibility of athletes, Wallace Community College adheres to the written policies of the National Junior College Athletic Association and the Alabama Community College Conference. These policies/guidelines may be found in the sources listed below (available from Athletic Director or any coach):

## **RECRUITING**

- *NJCAA Handbook and Casebook*
  - Article VIII, B. Recruitment
    - Section 1-4

## ADMISSION

- *NJCAA Handbook and Casebook*
  - Article V, Section 3

## FINANCIAL AID

- *NJCAA Handbook and Casebook*
  - Article VIII, A. Grant-in-Aid
    - Section 1-5
- *ACCC Handbook*
  - Article XXI, Scholarships and Grant-in-Aid.

## ELIGIBILITY

- *NJCAA Handbook and Casebook*
  - Article V, Section 4. Requirements for Athletic Eligibility.

In addition to the policies and procedures found through the aforementioned sources, **student-athletes** on an athletic scholarship must abide by the scholarship guidelines found in the Athletic Scholarship Guidelines Form (*Appendix A*).

## INDIVIDUAL RULES

**Student-athletes** will avoid all situations that will embarrass themselves, their families or the College. As a WCC athlete, you represent Wallace Community College both on the sports field and off campus in your personal life. You have an interest in the protection and control of the WCC image. Any article of clothing or item with the WCC logo is not to be worn or used at any function or social event that involves the inappropriate use of alcohol or drugs. You are expected to always act in a manner that supports a positive image of yourself as an athlete and ambassador of WCC. Every athlete that wears our letters represents us and is expected to live up to WCC standards.

**Student-athletes** will DRESS NEATLY and use GOOD PERSONAL HYGIENE at all times.

**Student-athletes** will be on time and ATTEND all classes.

**Student-athletes** will take extreme care of all equipment and property that belongs to the College.

**Student-athletes** will be on TIME for all College and team functions, with all required equipment necessary to compete.

**Student-athletes** will show RESPECT for coaches, College officials, faculty members, community members, opposing teams, game officials and fellow players.

**Student-athletes** will abide by all College, region and national rules.

**Student-athletes** will obey all city, county, state and/or national laws. Failure to do so may result in loss of scholarship and removal from the team.

Use, possession and/or distribution of narcotics, dangerous drugs or other controlled substances is prohibited except as expressed by law. **Student-athletes** are subject to unannounced random testing for enforcement of this rule. Students found in violation will be subject to disciplinary action, outlined later in this handbook.

Use of any tobacco products at any meeting, practice or athletic contest is prohibited by the NJCAA, ACCC and Wallace Community College. Any College official may report a policy violation to the coach or Athletic Director. Coaches are responsible for ensuring that all **student-athletes**, managers, and officials adhere to this policy. Failure to do so will result in disciplinary action, to be determined by the head coach of the particular sport.

## **TEAM RULES**

The individual rules stated above are the **minimum** rules required by the Athletic Department. Coaches may implement other rules that they feel are necessary for the success of their respective teams. Violation of any rule, regulation or law may subject the student to Disciplinary Hearing and possible loss of scholarship and/or suspension from the College.

## **TRAVEL AND TRANSPORTATION**

The Athletic Department will provide all transportation necessary for an athletic team. This includes travel to regular season and practice games, state and invitational tournaments and regional and national tournaments. It is the responsibility of the head coach to ensure that all players travel with the team and are under his/her supervision. Players will not be allowed to travel with parents/legal guardians to or from an athletic event. Head coaches will use discretion on extenuating circumstances to this rule.

The following travel policies have been developed for passengers on the College bus and are designed to keep the bus clean, to follow good safety practices, and to be respectful to fellow passengers:

- No travel bags are allowed inside the coach portion of the bus. Travel bags should be placed in the storage compartments beneath the bus. Nothing is to be placed in the overhead compartments larger than a book bag.
- After athletic events, no athlete should board the bus wearing a dirty uniform. Please shower (if available) and change clothes before boarding. If showers

are not available, it is the responsibility of each team to take measures to protect the seats. No cleats inside the bus.

- All drinks must have a twist-on top. No cans or open cups are allowed.
- Gum and candy are not allowed.
- Tobacco products are not allowed.
- All passengers must be seated at all times when the bus is in motion.
- No standing in the seats or draping over armrests/back of seats.
- Earphones must be worn when listening to music.
- When exiting the bus, clean your space and place refuse in the trash bag that will be provided.

The following travel policies have been developed for overnight stays, often required for tournaments and games of long distance:

- Rooming assignments will be made and kept on file by the head coach.
- Tobacco products are not allowed in the hotel room.
- All food and drinks must be disposed of in the hotel room's trash can – if there is an overflow, place overflow in outside trash cans on the hotel premises.
- If you spill a drink or cause a mess, it is your responsibility to immediately call hotel staff to assist with clean up.
- If the College incurs any additional financial obligations due to damages, as defined by the hotel management, the College athletic administrator will investigate. If the damages are warranted, ALL players staying in the room in question, unless someone comes forward to accept blame, are subject to the following (at minimum):
  - Responsible for repaying the College for expenses related to damages;
  - Written apology to hotel management and College President;
  - Ten hours of community service to be completed during the semester damages occurred;
  - Three game suspension – can be carried over to next semester; and
  - Meeting with College athletic administrator to determine if further punishment will be levied.

**Remember, you are always representing Wallace Community College, whether on campus or four hours away. The College has a positive image in the community and you will behave in a manner that reflects this image at all times.**

## **SCHOLARSHIP RENEWAL AND CANCELLATION**

**The scholarship agreement/letter of intent is signed for a period of one academic year.** Renewal of the scholarship is by recommendation of the head coach and approval by the Athletic Director, the College's athletic administrator and the College President.

Cancellation or modification of grant-in-aid during the period of its effectiveness because of injury or good/bad athletic performance is prohibited. Cancellation of a grant-in-aid is permitted if the **student-athlete**:

1. Voluntarily withdraws from a sport; or
2. Becomes academically ineligible per NJCAA bylaws; or
3. Is dismissed due to inappropriate behavior/conduct detrimental to the team.

**Other scholarship guidelines can be found in the Wallace Community College Athletic Department Scholarship Guidelines document (*Appendix A*). Please review this document before acknowledging receipt and acceptance of this handbook.**

## **TUTORING**

Student Support Services is located in Grimsley Hall on the Wallace Campus in Dothan. You may contact Mickey Baker or >YfHj jU`ma Ub`at 334.556.2\* &\$. Tutoring is offered to those who meet certain SSS criteria.

## **TEXTBOOK LOANS**

Under the scholarship agreement, the **student-athlete** will be issued textbooks from the WCC Bookstore for each semester of enrollment, while under scholarship. These textbooks can be obtained at the WCC Bookstore on or after the first day of each semester, are on loan to the student and must be properly cared for. It is the responsibility of the **student-athlete** to return all textbooks to the bookstore at the end of the semester. Any losses, damages or failure to return textbooks to the WCC Bookstore immediately following the end of each semester will result in denial to register for the subsequent term, restitution (**student-athlete's** responsibility), withholding of transcripts, possible loss of scholarship, and not being granted a transfer release/waiver.

**Note: The scholarship covers only class required textbooks, required course handouts and required access codes. It does not cover CDs, software, tools, kits, pens, pencils, notebooks, etc. If a CD and/or software are sold in a bundle with a textbook at the WCC Bookstore, it may be obtained with the athletic scholarship. The scholarship will NOT cover suggested or recommended items.**

## **INSURANCE**

Athletic accident insurance is provided by the institution for the benefit of **student-athletes**. This coverage is offered on an "excess" basis only. Under the terms of the policy, this coverage is considered excess to all other valid and collectible medical insurance policies. Most notable is parental insurance coverage under which the **student-athlete** is covered as an eligible dependent. It is **required** that the head coach have each **student-athlete** complete the insurance questionnaire (*Appendix B*), previous injury/illness form (*Appendix C*) and submit a

copy of the **student-athlete's** primary coverage card to the Athletic Director. A **student-athlete** will not be allowed to participate in any athletic functions until these questionnaires and copy of the **student-athlete's** primary coverage card (if applicable) is on file with the Athletic Director. It should be noted that this insurance policy covers only those injuries that are a direct result of the sport(s) in which the **student-athlete** participates.

In the event of an injury that the institution's insurance will cover, it is the responsibility of the Athletic Director to complete all necessary insurance forms so that a proper claim can be made. It is, however, the responsibility of the **student-athlete** and his/her parents to complete all forms required and return to the Athletic Director in a timely manner.

## **INJURIES**

If an injury occurs, the **student-athlete** must notify the head coach so that proper medical referrals can be made. An accident report must be completed and submitted to the Athletic Director; without this report an insurance claim cannot be filed. This will assist the head coach in making adjustments for participation and in assisting in the rehabilitation of the **student-athlete**.

## **PHYSICAL EXAMINATIONS**

All **student-athletes** participating in any one of the NJCAA certified sports must have passed a physical examination prior to their competition for each collegiate year in which they compete. It is the head coach's responsibility to see that each **student-athlete** has a valid physical examination form (*Appendix D*) on file in the Athletic Director's office.

## **UNIFORMS AND EQUIPMENT**

It is the responsibility of the head coach to issue and inventory all items of equipment that are necessary for the **student-athlete** to participate properly in the sport. All issued items remain the property of Wallace Community College. Failure to properly care for or replace lost/damaged items could result in forfeiture of the scholarship.

There are certain items that will be regarded as personal items that the Athletic Department will not furnish. The head coach will list these items and it is the responsibility of the **student-athlete** to obtain these items for his/her own use.

**Student-athletes** will be financially responsible for uniforms and equipment not returned to the Athletic Department. **Student-athletes** who fail to return College issued equipment will also have a registration and transcript hold placed on their account and thus, not be granted a transfer release/waiver.

## **ATHLETIC AWARDS**

Athletic awards are the responsibility of the head coach. All awards will follow the NJCAA, ACCC and Athletic Department guidelines.

## **ATTENDANCE, ABSENCES AND ACADEMIC PROGRESS MONITORING**

Students are **required** to attend all classes for which they are registered. Students should recognize that a mature acceptance of their responsibilities as a **student-athlete** is necessary for reasonable accomplishment in college work; this applies particularly in the area of all absences. Make sure you understand and follow each instructor's attendance policy.

**Student-athletes** will be issued progress reports at least three times a semester. The reports are designed to track academic progress and monitor attendance records. Consequences for unsatisfactory reports will be dealt with on an individual basis, but may include athletic suspension until a report (academic or attendance related) comes back satisfactory.

## **CLASS SCHEDULES AND DROP/ADD**

It is the responsibility of the head coach to monitor the **student-athlete's** selection of courses. This will ensure that the **student-athlete** is taking courses that will apply to the curriculum he/she has chosen for a degree. The head coach will have each term's class schedule on file in the Athletic Department. It is the **student-athlete's** responsibility to notify the head coach of any change in the schedule.

**Student-athletes** are not permitted to drop or add a course during the term without prior approval from the head coach, College athletic administrator and the **student-athlete's** academic advisor.

If a student withdraws from a course or is removed from the course roll because of non-attendance, Wallace Community College will not pay for a repeat of that same course. **Student-athletes** wishing to reenroll in that same course during a later semester will be financially responsible for all tuition, fees, and books associated with that particular class.

## **ATHLETIC ADVISORS**

Prior to registration for each semester, each **student-athlete** must be advised and counseled concerning the curriculum of his/her chosen field of study. A designated advisor works with each team to ensure scheduling conflicts do not occur. Coaches and players must obtain schedules through these team advisors.

## **EXIT SURVEY**

Upon completion of each athletic season, the Athletic Director will administer an exit survey to the **student-athlete**. This survey will be used to evaluate the athletic/academic program. The survey should be a useful tool to make necessary changes in the academic and athletic programs. Survey results will be distributed to the College athletic administrator.

## **INSTITUTIONAL POLICIES**

The institutional policies found in the general catalog are the minimum requirements for students attending this College. The Athletic Department recognizes that athletics require more guidelines to ensure proper function within the system. Therefore, **student-athletes** must adhere to all policies of the institution and the Athletic Department.

## **APPEAL PROCESS**

In the event that a **student-athlete** has a grievance, the matter should be resolved by following the athletic chain of command.

1. The **student-athlete** should first notify the head coach and, together with the coach, try to resolve the matter. The complaint should be issued in writing by the **student-athlete** to the head coach no later than two (2) business days (Monday-Friday) following the incident/issue in question.
2. If the complaint cannot be satisfactorily resolved, the coach, the **student-athlete**, and the Athletic Director should meet to solve the problem. A request for a meeting with the Athletic Director must be issued by the **student-athlete** no later than two (2) business days (Monday-Friday) following the initial meeting with the head coach.
3. In the event that the complaint cannot be settled to the satisfaction of all parties involved, the **student-athlete** may then appeal to the College's athletic administrator. This appeal must be issued in writing by the **student-athlete** to the College's athletic administrator no later than two (2) business days (Monday-Friday) following the meeting with the head coach and Athletic Director.
4. If the College's athletic administrator and the student cannot reach a settlement concerning the matter, the student should then appeal in writing to the Dean, Student Affairs and Sparks Campus no later than two (2) business days following the meeting with the College's athletic administrator.
5. If the Dean and the student cannot reach a settlement, the **student-athlete's** last recourse is to appeal to the Athletic Oversight Committee, in writing and no later than two (2) business days following the meeting with the Dean.
  - a. Appeals not made within the timeline provided will **NOT** be considered.
  - b. All written appeals must detail the incident and the reason for the appeal, to include the procedural error made by College personnel.
  - c. Each College employee will attach their report to the appeal as well. This will include their justification for their decision and any other pertinent facts that may assist College personnel with their decision.

## **ATHLETIC DEPARTMENT OVERSIGHT**

The individual coach is responsible for the general operation of each sport. The Athletic Director is committed to providing technical and budgetary support to all athletic programs. In an effort to provide quality technical expertise, the College has appointed an Athletic Director who has a number of year's experience. The

Athletic Director is available to assist all coaches to ensure compliance with all national and state regulations. In addition, he/she serves as advocate for the coaches and players as needed. The Athletic Director reports to the College's athletic administrator in all matters relating to athletics, who then reports to the Dean, Student Affairs and Sparks Campus. The Dean, Student Affairs and Sparks Campus is responsible to the President of the College for overall athletic operations. However, the ultimate responsibility for the oversight of the athletic programs rests with the President. The College's Athletic Oversight Committee serves as a review committee for the purpose of ensuring fair and equitable treatment for students and compliance with national, state, conference and local regulations. In addition, the committee has been established to review policies and procedures relating to athletics and will make recommendations to the President as needed.

## **DRUG TESTING OF STUDENT-ATHLETES**

All athletes will be subject to the appropriate NJCAA, ACCC and State Board of Education Policies relating to drug testing of **student-athletes**. For clarity and to assure adequate notice, the specific State Board Policy and Procedure is presented below.

### **ALABAMA STATE BOARD OF EDUCATION POLICY 806.02 GUIDELINES**

1. Participation in intercollegiate athletics is one of the privileges afforded as an extracurricular activity to students enrolled in the institutions of the Alabama Community College System. The State Board of Education wishes to ensure that the health and safety of **student-athletes** are not compromised and that **student-athletes** are discouraged from the use and abuse of illegal drugs. All students who voluntarily choose to participate in athletic practice and/or competition at any of the institutions of the Alabama Community College System are required to submit to drug testing as prescribed by the institution at regular and random intervals, both announced and unannounced.
2. Institutions participating in intercollegiate athletics will comply with all directives from The National Junior College Athletic Association concerning drug testing and substance abuse.
3. **Student-athletes** will be provided with educational programs, information and activities to prevent drug abuse and to promote the personal well-being of the athlete.
4. The Chancellor shall issue guidelines to assist in adherence to, implementation of and enforcement of this policy.

### **PERSONS TO BE TESTED**

Any student who desires to participate in intercollegiate athletics at any institution of the Alabama Community College System will be required to submit to appropriate drug testing as determined by the Chancellor.

### **TYPES OF TESTS TO BE PERFORMED**

1. An initial drug test will be required prior to eligibility determination for any scholarship and/or participation in intercollegiate athletics, and all **student-athletes** will be required each year to complete a mandatory drug test before each school year begins. A student will be required to authorize a drug test result to be provided to the Athletic Director, head coach, or other designated representative. The student's specimen must have been collected and tested within the two-week period prior to eligibility determination and prior to the beginning of each year thereafter. The institution will not be responsible for the initial testing of the student

although an institution may elect to pay for the initial screening with external funds.

2. After the initial drug test has been provided, further testing of the **student-athlete** will be conducted throughout the year at regular and random intervals, both announced and unannounced, utilizing an on-site testing device. All subsequent testing will be the responsibility of the assigned college employee. The assigned employee is to be a dean that is disassociated with athletics. The individual who conducts all random drug testing must be an employee of a recognized provider who is certified to do drug testing and not an employee of a member college. The on-site testing device shall be used only for subsequent testing and not for the initial test coordinated by the student. The Athletic Director, head coach, or other designated representative may request a test at any time. Random individual and/or random team testing will be done at least four times per year. Each college will test at least ten percent of its total athletes at each random testing, and this testing can be conducted outside of the **student-athlete's** particular competitive season. For random testing, all **student-athletes** will be included in a pool of names from which they may be selected by a computerized method of random selection. This selection shall be done by each institution by utilizing random number selection computer software. Each institution shall be responsible for maintaining an updated listing of **student-athletes** to provide an accurate random selection pool.

## **DRUGS TO BE TESTED**

The following panel of g|l (\* ) drugs shall be tested. Additional drugs may be added to the panel on the recommendation of the Athletic Director and with the approval of the president.

1. Amphetamines
2. Cocaine
3. THC
4. Opiates
5. PCP
6. Synthetic marijuana

## **CONSENT TO BE DRUG TESTED**

1. Each **student-athlete** is required to sign a statement certifying that he or she has received a copy of the drug testing policy and guidelines and consents to provide urine specimen(s) for the purpose of analysis. If the **student-athlete** is under eighteen (18) years of age, the **student-**

**athlete's** parent or legal guardian must sign the drug testing consent form in addition to the **student-athlete**. The Athletic Director, head coach, or other designated representative shall maintain the original of the signed consent form and may provide a copy of the consent form to the **student-athlete** upon request.

2. **Student-athletes** have the right to refuse to consent to drug testing under this program; however, **student-athletes** who decline participation in the program will not be permitted to participate in intercollegiate athletics.
3. **Student-athletes** may be excused from drug testing only under the most extreme circumstances (e.g., illness, family emergency). The **student-athlete** is responsible for providing written verification for such absences. Approval of a verifiable absence is the responsibility of the Athletic Director, head coach, or other designated representative.

## **SPECIMEN SELECTION**

A copy of the guidelines must be provided to each collection site person, prior to the collection of the specimen, to ensure that all specimens are collected and tested within these requirements. A specimen collection should not be initiated until the collection site has been made aware of the requirements of this program. Collection site personnel should contact the Athletic Director, head coach, or other designated representative to obtain a copy of these guidelines before any specimen collection is performed.

1. The collection site person shall be a licensed medical professional or technician who has been trained for collection in accordance with chain of custody and control procedures – not a coach, Athletic Director, or any other College employee.
2. Specimen collection procedures shall provide for the designated collection site to be secured in accordance with chain of custody and control procedures. Security during collection may be maintained by effective restriction of access to the collection materials and specimens.
3. When the **student-athlete** arrives at the collection site, the collection site person shall ensure that the **student-athlete** is positively identified as the individual selected for testing. This identification can be done through the presentation of photo identification or by an authorized institution representative. If the **student-athlete's** identity cannot be established, the collection site person shall not proceed with the collection until such identification can be made.
4. The student shall remove any unnecessary outer garments such as a coat or jacket. The collection site person shall ensure that all personal belongings such as bags, backpacks, purses, etc. remain with the outer

garments. Through a visual check, the collection site person will make an effort to ensure that no concealed containers are on the **student-athlete's** person.

5. The **student-athlete** may provide his/her specimen in the privacy of a stall or otherwise partitioned area that allows for individual privacy, unless there is reason to believe that a particular individual may alter or substitute the specimen to be provided. If direct observation is required, the collection site person or designated representative shall review and concur in advance with any decision by a collection site person to obtain a specimen under direct observation by a same gender collection site person.
6. If the **student-athlete** is unable to provide a specimen during the collection process, the individual may leave the collection site and return at a later time to begin the process again. The designated representative should be notified by the collection site person that the **student-athlete** was not able to provide a specimen at that time. The Athletic Director, Head Coach, or other designated representative is responsible for ensuring that the **student-athlete** returns to the collection site within the same day or, if not possible, no later than the following day.
7. Once the specimen has been collected, the **student-athlete** and the collection site person shall keep the specimen in view at all times prior to its being sealed and labeled. The collection site person and the **student-athlete** will complete the necessary information on the custody and control form. The **student-athlete** will sign the custody and control form certifying that the specimen identified as having been collected from him or her is in fact the specimen he or she provided. The specimen and the chain of custody and control form shall then be sealed in a plastic bag and labeled in the presence of the **student-athlete**. The **student-athlete's** participation in the specimen collection process is complete.

#### **ON-SITE TESTING TO BE USED**

1. Regular and random testing by the institution shall be performed by utilizing an on-site testing device. The collection site person performing the test shall check the specimen containers to ensure that the seals have not been broken and that all identifying numbers of the specimen containers match the information on the chain of custody and control form.
2. Using only the primary specimen, the individual performing the test shall transfer the urine onto the testing device. A negative test result shall be recorded on the chain of custody and control form and in a test results log book. The log book shall contain the **student-athlete's** identification number, date of test, and test result. The testing device that was used

shall be maintained with the completed chain of custody and control form for each **student-athlete**. Positive test results shall be recorded on the chain of custody and control form and in the test results log book. A positive test shall require that the specimen be sent to a certified laboratory for confirmatory testing. The split sample which has not been tested shall be the specimen sent to the laboratory.

## **DRUG TESTING LABORATORY**

Laboratories certified by the Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services (HHS), must be used to perform confirmatory urine drug testing analysis. These laboratories have met the minimum criteria established in the Mandatory Guidelines for Federal Workplace Drug Testing Programs.

## **MEDICAL REVIEW OF POSITIVE DRUG TEST RESULTS**

1. All specimens identified as positive on the initial test shall be confirmed by the testing laboratory.
2. A Medical Review Officer (MRO), who shall be a licensed physician with knowledge of substance abuse disorders, shall review and interpret positive test results obtained from the testing laboratory. The MRO shall:
  - a. Examine alternate medical explanations for any positive test results. This action may include conducting a medical interview and review of the **student-athlete's** medical history, or review of any other relevant biomedical factors.
  - b. Review all medical records made available by the tested **student-athlete** when a confirmed positive test could have resulted from legally prescribed medication. Prior to making a final decision on the results of the confirmed positive test, the MRO shall give the **student-athlete** an opportunity to discuss the result. The MRO shall contact the **student-athlete** directly to discuss the results of the test or if unsuccessful in contacting the **student-athlete** directly, the MRO shall contact the designated representative who shall have the **student-athlete** contact the MRO as soon as possible.

## **REPORTING OF DRUG TEST RESULTS**

1. Reporting of drug test results shall be made to the Athletic Director, head coach, or other designated representative. Test results will not be released to any individual who has not been authorized to receive such results.
2. A written notification of the test results shall be provided to the Athletic Director, head coach, or other designated representative. The test result

shall not be received from any student or any person who is not a designated representative of the service provider. Students shall not be allowed to hand deliver any test results to representatives. Drug test results can be received by U.S. mail, if sent directly from the service provider. The envelope should be marked "CONFIDENTIAL" and should not be opened by any person not authorized by the institution to receive such results.

3. Any institution of the Alabama Community College System may refuse to accept any test result that does not meet the requirements of the policy and guidelines.
4. When drug test results are received by the Athletic Director, head coach, or other designated representative, these records shall be maintained in a confidential manner in a secured file with limited access. Individual records shall not be released to any person, other than the **student-athlete**, without first obtaining a specific written authorization from the **student-athlete**.
5. Any positive drug test results are to be communicated by the Athletic Director, head coach, or other designated representative within three business days to the college President.

## **PENALTIES FOR A CONFIRMED POSITIVE DRUG TEST OR REFUSAL TO BE TESTED**

### **A. FIRST POSITIVE TEST**

1. **Student-athlete** will be temporarily suspended from athletic competition for a minimum two-week period.
2. **Student-athlete** will be required to participate and successfully complete a substance abuse program before the **student-athlete** will be permitted to return to participation in the athletic program.
  - a. The Athletic Director, head coach, or other designated representative will assign and/or refer the **student-athlete** to a substance abuse program. The length of the substance abuse program will be determined by the program counselor. The **student-athlete** must inform the designated representative of athletics regarding the expected completion date of the substance abuse program and whether or not the **student-athlete** successfully completes the program. The **student-athlete** will be responsible for any costs associated with the counseling and treatment in the substance abuse program. Any referrals to any substance abuse program shall be confidential.

- b. A refusal and/or failure to successfully complete the assigned substance abuse program will require immediate suspension from the athletic program, as well as notification to the ACCC and parents/guardian of the **student-athlete** of the positive drug test result and suspension.
    - c. If a **student-athlete** does not successfully complete the assigned substance abuse program within two (2) weeks, permanent suspension from athletic competition and forfeiture of any athletic scholarship will be required.
  3. **Student-athlete** must receive a negative follow-up drug test before the **student-athlete** will be permitted to return to participation in the athletic program. **Student-athlete** is financially responsible for this follow-up test. A failure to receive a negative follow-up drug test within a reasonable time will require immediate and permanent suspension from the athletic program, as well as notification to the ACCC and parents/guardian of the **student-athlete** of the positive drug test result.
  4. **Student-athletes** who are suspended for a positive drug test and successfully complete a substance abuse program will be required to submit to follow-up drug testing for up to twelve (12) months while in the athletic program.

#### **A. SECOND POSITIVE TEST**

1. Permanent suspension from athletic competition and forfeiture of any athletic scholarship.
2. Notification of the permanent suspension to the **student-athlete's** parent/guardian as a result of the second positive test result.
3. Notification of the permanent suspension to the ACCC by the member college President as a result of second positive drug test result.

#### **PROHIBITION FROM ENROLLING AT OTHER MEMBER COLLEGE**

Students who are suspended, whether temporarily or permanently, from a member college for failing to comply with the drug policy will be prohibited from enrolling at any other member college until such student is in compliance with the drug policy.

#### **REFUSAL TO BE TESTED**

A **student-athlete** who refuses to be tested for drugs, after initially consenting to be tested by signing the appropriate consent form, shall be considered to have made a decision not to participate in the athletic program. A refusal to cooperate in

testing will result in suspension from the athletic program and forfeiture of any athletic scholarship. The designated representative shall be notified of any refusal to be tested.

### **FAILURE TO APPEAR**

A **student-athlete** who fails to appear for drug testing will be given an opportunity to explain the failure to appear. If the **student-athlete** agrees to be tested, another collection will be scheduled. If the **student-athlete** fails to appear for the second time, the failure to appear shall be treated as if a positive test result had occurred. The designated representative shall be notified of any failure to appear.

### **INTERFERENCE WITH COLLECTION PROCESS**

The **student-athlete** designated to provide a specimen shall not be interfered with in any manner, by any person, other than those properly and specifically authorized by collection site personnel in order that the collection process shall be conducted within these guidelines. Any other student or **student-athlete** who interferes or in any way attempts to alter the results of the designated **student-athlete's** specimen shall be subject to discipline, including suspension from the institution, suspension from the athletic program, and forfeiture of any athletic scholarship. Any **student-athlete** designated to provide a specimen, who voluntarily participates in this interference, shall be subject to discipline, including suspension from the institution, suspension from the athletic program, and forfeiture of any athletic scholarship.

### **EDUCATION PROGRAM**

A drug use and abuse education program shall be provided to all **student-athletes** at the beginning of the fall term and at other times as deemed necessary by the Athletic Director, head coach or other designated representative. Attendance is mandatory for all **student-athletes**. An attendance roster shall be maintained for each session of this program and shall include the signatures of each **student-athlete** and the date of attendance. This program should include, at a minimum, the following use and abuse of illegal drugs.

- A. Discussion of drug testing policy for **student-athletes**; and
- B. Presentation by a qualified substance abuse counselor or an individual with relative qualifications for such presentations; and
- C. Distribution of education materials concerning the use and abuse of illegal drugs.

## **PUBLICATION OF POLICY**

The institution shall include the Drug Testing of **Student-athletes** policy in the student handbook and other appropriate institution publications, to ensure adequate notice and distribution.

1.1 Participation in intercollegiate athletics is one of the privileges afforded as an extracurricular activity to students enrolled in the institutions of The Alabama Community College System. The State Board of Education wishes to ensure that the health and safety of **student-athletes** are not compromised and that **student-athletes** are discouraged from the use and abuse of illegal drugs. Therefore, it is the policy of the State Board of Education that students participating in intercollegiate athletics submit to urinalysis drug testing at regular and random intervals, both announced and unannounced. This policy only authorizes drug testing of students who voluntarily choose to participate in intercollegiate athletics of The Alabama College System. Any student participating in athletic practice and/or competition at any of the institutions of The Alabama College System will be required to submit to such testing.

1.2 The purpose of this policy is to prevent illegal drug usage, to alert **student-athletes** to serious physical, mental and emotional harm caused by drug abuse, and to maintain an athletic environment consistent with the high standards of the colleges and with the overall development and education of their **student-athletes**.

1.3 **Student-athletes** will be provided with educational programs, information and activities to prevent drug abuse and to promote the personal well-being of the athlete.

The execution and enforcement of this policy will follow procedures to screen the urine specimens of **student-athletes** for drug use. Current **student-athletes** suspected of violating this policy will also be tested. These procedures are designed not only to detect violations of this policy but to ensure fairness to each individual. Every effort will be made to maintain the dignity and confidentiality of all individuals involved. **Student-athletes** determined to be in violation of this policy will be subject to disciplinary action up to and including termination of scholarship and team athletics.

**In order to gain eligibility with the Wallace Community College Athletic Department, all athletes must sign a Drug Test Policy and Consent Form (Appendix E).**

## **FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA)**

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. & 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education.

FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level. Students to whom the rights have transferred are "eligible students."

- Parents or eligible students have the right to inspect and review the student's education records maintained by the school. Schools are not required to provide copies of records unless, for reasons such as great distance, it is impossible for parents or eligible students to review the records. Schools may charge a fee for copies.
- Parents or eligible students have the right to request that a school correct records which they believe to be inaccurate or misleading. If the school decides not to amend the record, the parent or eligible student then has the right to a formal hearing. After the hearing, if the school still decides not to amend the record, the parent or eligible student has the right to place a statement with the record setting forth his or her view about the contested information.
- Generally, schools must have written permission from the parent or eligible student in order to release any information from a student's education record. However, FERPA allows schools to disclose those records, without consent, to the following parties or under the following conditions (34 CFR & 99.31):
  - The disclosure is to other school officials, including teachers, within the agency or institution whom the agency or institution has determined to have legitimate educational interests.
  - The disclosure is, subject to the requirements of § 99.34, to officials of another school, school system, or institution of postsecondary education where the student seeks or intends to enroll.
  - The disclosure is, subject to the requirements of § 99.35, to authorized representatives of: (i) The Comptroller General of the United States; (ii) The Secretary; or (iii) State and local educational authorities.
  - The disclosure is in connection with financial aid for which the student has applied or which the student has received, if the information is necessary for such purposes as to:
  - The disclosure is to State and local officials or authorities to whom this information is specifically—
  - The disclosure is to organizations conducting studies for, or on behalf of, educational agencies or institutions to:
  - The disclosure is to accrediting organizations to carry out their accrediting functions.

- The disclosure is to parents of a dependent student., as defined in section 152 of the Internal Revenue Code of 1954. [Note: The above section should read “the Internal Revenue Code of 1986.”]
- The disclosure is to comply with a judicial order or lawfully issued subpoena.
  - (ii) The educational agency or institution may disclose information under paragraph (a)(9)(i) of this section only if the agency or institution makes a reasonable effort to notify the parent or eligible student of the order or subpoena in advance of compliance, so that the parent or eligible student may seek protective action, unless the disclosure is in compliance with—
    - A Federal grand jury subpoena and the court has ordered that the existence or the contents of the subpoena or the information furnished in response to the subpoena not be disclosed; or
    - (B) Any other subpoena issued for a law enforcement purpose and the court or other issuing agency has ordered that the existence or the contents of the subpoena or the information furnished in response to the subpoena not be disclosed.
  - (iii) If the educational agency or institution initiates legal action against a parent or student and has complied with paragraph (a)(9)(ii) of this section, it may disclose the student’s education records that are relevant to the action to the court without a court order or subpoena.
- The disclosure is in connection with a health or safety emergency, under the conditions described in [§ 99.36](#).
- The disclosure is to an alleged victim of any crime of violence, as that term is defined in Section 16 of title 18, United States Code, of the results of any disciplinary proceeding conducted by an institution of postsecondary education against the alleged perpetrator of that crime with respect to that crime.

Schools may disclose, without consent, “directory” information such as a student’s name, address, telephone number, date and place of birth, honors and awards, and dates of attendance. However, schools must tell parents and eligible students about directory information and allow parents and eligible students a reasonable amount of time to request that the school not disclose directory information about them. Schools must notify parents and eligible students annually of their rights under FERPA. The actual means of notification (special letter inclusion in a PTA bulletin, student handbook, or newspaper article) is left to the discretion of each school.

For additional information or technical assistance, you may call (202)260-3887 (voice). Individuals who use TDD may call the Federal Information Relay Service at 1-800-877-8339

Or you may contact us at the following address:

Family Policy Compliance Office  
U.S. Department of Education  
400 Maryland Avenue, SW  
Washington, DC.

“It is the official policy of the Alabama Department of Postsecondary Education and Wallace Community College that no person in Alabama shall, on the grounds of race, color, disability, sex, religion, creed, national origin, or age, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program, activity, or employment.”

**In order to gain eligibility with the Wallace Community College Athletic Department and to remain in compliance with FERPA, all athletes must sign and return a Release of Information Form (*Appendix F*).**

## DOCUMENTS REQUIRED FOR PARTICIPATION

The following documents are **required** to be provided to the Athletic Director **PRIOR** to any athletic participation:

- NJCAA Eligibility Affidavit (freshman and transfers) (*Appendix G*)
- Athletic Scholarship Guidelines (scholarship athletes only)
- Completed Emergency Contact and Insurance Information
- Copy of current insurance card
- Previous Illness/Injury Form
- Copy of completed physical (completed by physician)
- Acknowledgment and Consent to be Drug Tested Form
- Initial Drug Screen (must be paid by student per State Board policy)
- Signed Release of Information Form
- Signed Consent to Participate Form (*Appendix H*)
- Acknowledgment of Athletic Handbook (*Appendix I*)
- NJCAA Transfer Waiver and Tracking Form (if applicable)

**All applicable documents listed above must be completed to be the best of student-athlete's knowledge, signed by the student-athlete and parent/legal guardian (if applicable), and on file in the Athletic Department's offices in order to be in compliance with the NJCAA, and thus, no exceptions will be made to this rule.**

## APPENDIX A

### WALLACE COMMUNITY COLLEGE ATHLETIC SCHOLARSHIP GUIDELINES 2014-2015

1. The number of Athletic Scholarships to be awarded by the Athletic Department at Wallace will be the number allowed by the NJCAA each year not to exceed the set allocation by the State Board of Education.
2. The terms of the scholarship are as follows:
  - a. Scholarship will include tuition and fees only (no other stipends or payments for room/board are allowed). Books will be loaned to the **student-athlete** at the beginning of each semester.
  - b. Scholarship is void if student quits team, becomes academically ineligible per NJCAA bylaws, or is dismissed from team due to inappropriate behavior.
    - i. **Any student-athlete who is removed from athletic scholarship for the aforementioned reasons will be required to reimburse the College tuition and fees for the semester in which he/she was dismissed.**
  - c. Student will be financially responsible for books, uniforms and equipment not returned.
3. The maximum number of credit hours that shall be provided by the scholarship to any athlete shall be limited to the required number of credit hours as per the WCCD course catalog for the course of study in which the student is initially enrolled, typically 64 credits. With approval (see Appeals Form), the following options may be available to the student:
  - a. Up to 12 additional hours in the course of study, as described in College Catalog under which the athlete initially enrolls; and hours to cover developmental courses; and
  - b. Up to 4 additional hours for required HPR courses associated with the sport in which the **student-athlete** is awarded a scholarship; and
  - c. Up to 12 additional hours in the event of a change in major or course of study; and
  - d. Additional hours when granted NJCAA hardship status.
4. Athletic scholarships may not be given for any term in which the student does not meet NJCAA eligibility requirements without written approval (see Appeals Form). A **student-athlete** who fails to meet the criteria of his/her scholarship will not receive a probationary status – that is, the scholarship may be terminated. The continuation of aid will be evaluated on a case-by-case basis by the Athletic Director and coach. The Athletic Director will send written notification of the decision as to whether or not the scholarship will be terminated to the **student-athlete**, coach and Scholarship Coordinator. If written approval is granted, the additional hours for the non-eligible term will be those in 3a above.

5. Athletes should be removed from scholarship using the NJCAA Release Agreement. The Financial Aid/Scholarship Office will remove the scholarship upon receipt of the Release Agreement. The Scholarship Office must receive the NJCAA Release Form before a scholarship can be re-awarded for the next term.
6. Managers will be required to meet the same credit hour and GPA requirements to keep their Athletic Scholarship as required by the NJCAA for athletic eligibility.
7. Athletic Scholarships will begin on August 1, the official start date of the Letter of Intent (NJCAA on-line form) for new athletes. A new **student-athlete** will not be allowed to take summer classes on Athletic Scholarship proceeding the August 1 start date of his/her Letter of Intent (LOI) unless the coach has an available scholarship for the current year as verified by the issuance of an NJCAA LOI. In that case, the athlete would sign a LOI for the current year scholarship for summer classes only and another LOI for the scholarship to begin on August 1. Additional scholarship hours will not be granted for this purpose; however, the athlete may use his/her 12 "additional hours" as described in No. 3 above for this purpose.
8. Athletes who have not graduated from an accredited high school or obtained a GED as described in the NJCAA eligibility bylaws, may take 12 hours and earn a 1.75 GPA at WCCD to establish eligibility. Additional scholarship hours will not be granted for this purpose; however, the athlete may use his/her 12 "additional hours" as described in No. 3 above for this purpose. Sport programs must have available scholarships for the current year as verified by the issuance of an NJCAA LOI.
9. Bookstore vouchers will not be issued until eligibility for the term is confirmed and books from the previous semester have been returned to the WCC Bookstore. Books are due when finals are complete.
10. **Student-athletes** are required to provide a drug test to the Athletic Director to validate the LOI. This also applies to returning athletes signing a new LOI.
11. **Student-athletes** are responsible for applying their scholarship to their account. If a student has multiple scholarships or financial aid, they should contact the Business Office to be sure all scholarships are applied correctly.
12. **Student-athletes** must be full-time to be on scholarship during the Spring and Fall semester. If a student drops below full-time status, they will be ineligible and will be responsible for paying for their tuition. Exceptions may be made on an individual basis as determined by the head coach, Athletic Director and College athletic administrator.

**APPENDIX B**

**WALLACE COMMUNITY COLLEGE  
EMERGENCY CONTACT AND INSURANCE INFORMATION FORM**

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Sport(s) \_\_\_\_\_

Student Number \_\_\_\_\_ Academic Year \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_

Cell # \_\_\_\_\_ Home # \_\_\_\_\_ Work # \_\_\_\_\_

Policy Holder Name & DOB \_\_\_\_\_

Relationship to Student-Athlete \_\_\_\_\_

Address \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_

Insurance Company Name \_\_\_\_\_

Insurance Co. Address \_\_\_\_\_

Group # \_\_\_\_\_ I.D.# \_\_\_\_\_

Effective Date of Policy \_\_\_\_\_ Expiration Date \_\_\_\_\_

Primary Physician \_\_\_\_\_ Office # \_\_\_\_\_

Policy Limit \_\_\_\_\_ Policy Deductible \_\_\_\_\_

Policy Co-Pay \_\_\_\_\_

Does policy cover athletically-related injuries? \_\_\_\_\_

I authorize any Health Care Provider, Insurance Company, Person, or Organization to release information regarding medical, dental, mental, alcohol or drug abuse history, or treatment to the Plan Administrator, or their employees and authorized agents for the purpose of validating and determining benefits payable. I further authorize release of this information to WCC Athletic Department staff.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student-Athlete Signature

\_\_\_\_\_  
Date

**To ensure eligibility for participation this form must be completed and returned immediately. Please keep a copy for your records.**

Return To: Mackey Sasser, Athletic Director, 1141 Wallace Drive, Dothan, AL 36303

**APPENDIX C**

**WALLACE COMMUNITY COLLEGE  
PREVIOUS INJURY/ILLNESS RELEASE FORM**

Athlete's Name \_\_\_\_\_

Sport \_\_\_\_\_

If there has been an injury or any medical condition that prevented, limited, or altered your participation in, or preparation of athletic activity, with in the last 12 months, you must be medically released by the treating physician before being allowed to participate in Wallace Community College Athletic activities.

\_\_\_\_\_  
Treating Physician

\_\_\_\_\_  
Office Phone #

\_\_\_\_\_  
Address City State Zip

What was the injury/condition that prevented, limited, or altered the student-athlete named above from participation or preparation for athletic activity.

\_\_\_\_\_  
Injury/Condition

\_\_\_\_\_  
Comments

Date first seen and/or treated \_\_\_\_\_

On the basis of my treatment, and/or evaluation, I have found no reason which makes it medically inadvisable for the student-athlete to fully and completely participate in any intercollegiate activities and release this student-athlete for intercollegiate participation.

\_\_\_\_\_  
Physician Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Physician Signature

# SOUTHERN BONE & JOINT SPECIALISTS SPORTS MEDICINE & REHAB

1500 Ross Clark Circle  
Dothan, Alabama 36301

(334) 793-2663  
1-800-460-2663  
Office Hours 8:00 AM - 6:00 PM

404 N. Main Street  
Enterprise, Alabama 36330  
(334) 393-7465

345 Healthwest Drive  
Dothan, Alabama 36303

## MEDICAL SCREENING EXAMINATION FORM

DATE \_\_\_\_\_ School or Organization \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street

City State Zip

Phone (\_\_\_\_\_) \_\_\_\_\_ S.S. # \_\_\_\_\_

Parents Work Phone (\_\_\_\_\_) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Name of Family Physician \_\_\_\_\_

CONSENT FOR SCREENING: The undersigned agrees to submit to a medical screening examination for athlete participation. I understand that this is a screening examination designed to identify common conditions or infirmities that would limit or prevent participation in athletic activities. This examination is not intended to be comprehensive and may not detect some types of latent or hidden medical conditions.

This is to certify that I have read and understand the above information and have given my permission and consent to the screening for athletic participation.

I hereby state that, to the best of my knowledge, the answers I have given on the medical examination are true and correct.

\_\_\_\_\_  
Student Athlete's Signature Date

\_\_\_\_\_  
Parent's Signature Date



**SOUTHERN BONE &  
JOINT SPECIALISTS**

**RELEASE OF MEDICAL INFORMATION  
& ACKNOWLEDGEMENT OF PRIVACY PRACTICES**

In order to protect the privacy and security of individual health information, Southern Bone & Joint Specialists is complying with the HIPAA (Health Insurance Portability and Accountability Act of 1996) Privacy Rule. Our **Notice of Privacy Practices** is included in this packet.

**Be sure to sign and return this form along with your physical form in order for your physical exam to be done.**

**RELEASE OF MEDICAL INFORMATION:**

I \_\_\_\_\_ understand that participation in a sports program is a privilege. Along with the participation, there is adherent danger and possibilities of injury. In the event of an injury or any recognition of abnormalities found within the physical exam, I authorize Southern Bone & Joint Specialists to discuss my condition with other medical professionals involved with the treatment of my condition including referring physicians. I understand that my condition may also need to be discussed with my school officials.

Communication from Southern Bone & Joint Specialists will be with the student, their family or guardian and if necessary any of the following: School Athletic Director, Head Sports Coach, Assistant Coaches, school insurance coordinator, the Principal, Primary Care Physician, Pediatrician and Referring Physicians.

It is not the practice of Southern Bone & Joint Specialists, to release individual health information to the media on any sports injury or health status. All such inquiries will be referred to the school or Head Sports Coach.

I acknowledge and agree with the above stated paragraphs and the **Notice of Privacy Practices** included in this packet.

\_\_\_\_\_  
Print Name of Student

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

Please list below the names of any individuals who we may disclose any medical and/or account billing information on your behalf. These people will be allowed to act as your personal representative.

NAME

RELATIONSHIP

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# ALABAMA HIGH SCHOOL ATHLETIC ASSOCIATION

## Preparticipation Physical Evaluation Form

**History** \_\_\_\_\_ Date \_\_\_\_\_  
 Name \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 School \_\_\_\_\_ Grade \_\_\_\_\_ Sport \_\_\_\_\_

Explain "Yes" answers below:	Yes	No
1. Has a doctor ever restricted/denied your participation in sports?	<input type="checkbox"/>	<input type="checkbox"/>
2. Have you ever been hospitalized or spent a night in a hospital? Have you ever had surgery?	<input type="checkbox"/>	<input type="checkbox"/>
3. Do you have any ongoing medical conditions (like Diabetes or Asthma)?	<input type="checkbox"/>	<input type="checkbox"/>
4. Are you presently taking any medications or pills (prescription or over-the-counter)?	<input type="checkbox"/>	<input type="checkbox"/>
5. Do you have any allergies (medicine, pollens, foods, bees or other stinging insects)?	<input type="checkbox"/>	<input type="checkbox"/>
6. Have you ever passed out during or after exercise? Have you ever been dizzy during or after exercise? Have you ever had chest pain or discomfort in your chest during or after exercise? Do you tire more quickly than your friends during exercise? Have you ever had high blood pressure? Have you ever been told that you have a heart murmur, high cholesterol, or heart infection? Have you ever had racing of your heart or skipped heartbeats? Has anyone in your family died of heart problems or a sudden death before age 50? Does anyone in your family have a heart condition? Has a doctor ever ordered a test on your heart (EKG, echocardiogram)?	<input type="checkbox"/>	<input type="checkbox"/>
7. Do you have any skin problems (itching, rashes, staph, MRSA, acne)?	<input type="checkbox"/>	<input type="checkbox"/>
8. Have you ever had a head injury or concussion? Have you ever been knocked out or unconscious? Have you ever had a seizure? Have you ever had a stinger, burn, pinched nerve, or loss of feeling or weakness in your arms or legs?	<input type="checkbox"/>	<input type="checkbox"/>
9. Have you ever had heat or muscle cramps? Have you ever been dizzy or passed out in the heat?	<input type="checkbox"/>	<input type="checkbox"/>
10. Do you have trouble breathing or do you cough during or after activity? Do you take any medications for asthma (for instance, inhalers)?	<input type="checkbox"/>	<input type="checkbox"/>
11. Do you use any special equipment (pads, braces, neck rolls, mouth guard, eye guards, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>
12. Have you had any problems with your eyes or vision? Do you wear glasses or contacts or protective eye wear?	<input type="checkbox"/>	<input type="checkbox"/>
13. Have you ever had any other medical problems (infectious mononucleosis, diabetes, infectious diseases, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>
14. Have you had a medical problem or injury since your last evaluation?	<input type="checkbox"/>	<input type="checkbox"/>
15. Have you ever been told you have sickle cell trait? Has anyone in your family had sickle cell disease or sickle cell trait?	<input type="checkbox"/>	<input type="checkbox"/>
16. Have you ever sprained/strained, dislocated, fractured, broken or had repeated swelling or other injuries of any bones or joints? <input type="checkbox"/> Head <input type="checkbox"/> Back <input type="checkbox"/> Shoulder <input type="checkbox"/> Forearm <input type="checkbox"/> Hand <input type="checkbox"/> Hip <input type="checkbox"/> Knee <input type="checkbox"/> Ankle <input type="checkbox"/> Neck <input type="checkbox"/> Chest <input type="checkbox"/> Elbow <input type="checkbox"/> Wrist <input type="checkbox"/> Finger <input type="checkbox"/> Thigh <input type="checkbox"/> Shin <input type="checkbox"/> Foot	<input type="checkbox"/>	<input type="checkbox"/>
17. When was your first menstrual period? _____ When was your last menstrual period? _____ What was the longest time between your periods last year? _____		
Explain "Yes" answers: _____ _____ _____		

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

Signature of athlete \_\_\_\_\_ Date \_\_\_\_\_

Signature of parent/guardian \_\_\_\_\_

**DUPLICATE AS NEEDED**

Student Name: \_\_\_\_\_

**Rule 1, Sec. 14** - In order for a student to be eligible for interscholastic athletics, there must be on file in the Superintendent's or Principal's office a current physician's statement certifying that the student has passed a physical exam, and that in the opinion of the examining physician (M.D. or D.O.) the student is fully able to participate in interscholastic athletics (Grades 7-12). The AHSAA Physicians Certificate (Form 5) must be used. **A physical exam will satisfy the requirement for one calendar year from the date of the exam.**

**Preparticipation Physical Evaluation**

		Height _____	Weight _____	BP _____ / _____	Pulse _____
		Vision R 20/ _____	L 20/ _____	Corrected: Y N	
LIMITED		Normal	Abnormal Findings		
	Cardiovascular				
	Pulses				
	Heart				
	Lungs				
	Skin				
COMPLETE	E.N.T.				
	Abdominal				
	Genitalia (males)				
	Musculoskeletal				
	Neck	Flex	EXT	ROT	
	Shoulder	Delt	Sup	IR	ER ROM
	Elbow	Flex	EXT		
	Wrist	Flex	EXT	PRO	SUP
	Hand	Grip			
	Back	Sco	Flex	EXT	
	Knee	Hams	Hipflex	QUAD	Exam
	Ankle	HC			
	Foot				
	Other				

Clearance:

- A. Cleared
- B. Cleared after completing evaluation/rehabilitation for:
- C. Not cleared for:  Collision  
 Contact  
 Noncontact: \_\_\_\_\_ Strenuous \_\_\_\_\_ Moderately Strenuous \_\_\_\_\_ Nonstrenuous

Due to: \_\_\_\_\_

Recommendation: \_\_\_\_\_

Name of Physician: \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Signature of Physician \_\_\_\_\_, M.D. or D.O.

**APPENDIX E**

**WALLACE COMMUNITY COLLEGE  
ATHLETIC DEPARTMENT**

**CONSENT TO DRUG TESTING  
&  
ACKNOWLEDGEMENT OF STUDENT ATHLETE DRUG TESTING POLICY**

I understand that to participate in intercollegiate athletics (including athletic managers), I will be required to submit to mandatory drug testing. I agree to submit to urine specimen collections for purposes of analysis for drug use. I further agree and consent to the disclosure of the records and test results relating to this analysis to be released to the Athletic Director, Head Coach, or other designated college representative in order that my eligibility to participate in the athletic program can be determined.

Additionally, I certify that I have received a copy of The Alabama College System Drug Testing Policy and Guidelines for Student Athletes and I have read and understand the requirements of the policy and guidelines in order to participate in intercollegiate athletics including parental notification requirements. My signature below further authorizes Wallace Community College to notify my parents and/or guardians on the results of my drug test, any sanctions that may or may not be placed on me in relation to the Drug Testing Policy or other issues relating to the Drug Testing Policy.

\_\_\_\_\_  
Date

\_\_\_\_\_  
**Student Athlete's** Signature

\_\_\_\_\_  
Witnessed: Coach/Athletic Director

\_\_\_\_\_  
**Student Athlete's** Printed Name

\_\_\_\_\_  
Parent/Legal Guardian Signature  
(if under 19 years of age)

**APPENDIX F**

**WALLACE COMMUNITY COLLEGE-DOTHAN  
RELEASE OF INFORMATION FORM**

In compliance with the Family Education Rights and Privacy Act (FERPA), the policy of Wallace Community College is to refuse to grant third party access to student records without the written consent of the individual student. Any consent given must include the specific records to be released or reviewed and the names of the individuals to whom the information may be released. If you wish to grant permission for your records to be reviewed, please complete the form below.

Student Name \_\_\_\_\_ Student # \_\_\_\_\_

**I request the following records be released when appropriate:**

\_\_\_\_\_ All of my student records, including athletic information, transcripts, grade appeals, financial aid records, disciplinary records, etc.

**To whom may student files be released?**

<u>Name and Address</u>	<u>Relationship</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**



# NJCAA Eligibility Affidavit



SPORT: \_\_\_\_\_ Date: \_\_\_\_\_

**Fill in all applicable information on this form to assist in determining eligibility for the NJCAA.**

Name: \_\_\_\_\_ Birth Date: \_\_\_/\_\_\_/\_\_\_ Social Security #: \_\_\_-\_\_\_-\_\_\_  
(First, Middle, Last)

College Address: \_\_\_\_\_  
Street Address City, State, Zip Code

Phone Number(s): \_\_\_\_\_ Email Address: \_\_\_\_\_

## Personal Information:

Home Address: \_\_\_\_\_  
Street Address City, State, Zip Code

Phone Number: \_\_\_\_\_ Parents' Names: \_\_\_\_\_

Are you a United States Citizen or a Permanent Resident\*? Yes \_\_\_\_\_ No \_\_\_\_\_ (\*Holder of a Green Card or F1 VISA)

Are you on another type of VISA? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, what type? \_\_\_\_\_

## High School Information:

High School(s) Attended: \_\_\_\_\_ City, State & Country: \_\_\_\_\_

Graduated?: Yes\* \_\_\_\_\_ No \_\_\_\_\_ High School Graduation Date (month/year): \_\_\_/\_\_\_

Check here if you have earned a \*GED: \_\_\_\_\_ GED: Date Earned (month/year): \_\_\_/\_\_\_

**\* Enclose a COPY of your High School Diploma or GED Certificate**

## Additional Information:

1. Did you take any college credit classes while in high school? Yes\* \_\_\_\_\_ No \_\_\_\_\_

\* If yes, from what college(s)? \_\_\_\_\_

**\* If yes, please furnish transcript(s) from each college.**

2. Have you ever signed a Letter of Intent form with any institution? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, specify the College: \_\_\_\_\_ Date (day/month/year): \_\_\_/\_\_\_/\_\_\_

3. Have you ever participated in a sport in a country other than the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, describe the situation and complete the following: \_\_\_\_\_

Sport(s)? \_\_\_\_\_ Country: \_\_\_\_\_ Dates: \_\_\_\_\_

4. Have you ever been red-shirted for a season? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, list when, where, and describe the situation. \_\_\_\_\_

**(Please continue on to the next page.)**

(Page 2 - NJCAA Eligibility Affidavit Continued)

5. Have you ever participated in practices/tryouts/exhibitions/scrimmages/games for an intercollegiate team other than this college? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, name the school, date, sport, and describe the situation. \_\_\_\_\_

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6. Have you ever played on a club team at a college or university? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, name the school, sport and the dates. \_\_\_\_\_

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7. Have you ever received money beyond expenses for participating in any athletic event? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, describe the situation. \_\_\_\_\_

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**List ALL Colleges Attended Full-Time and/or Part-Time after High School**

All transcripts from all previous institutions must be included.

College: \_\_\_\_\_ Dates: \_\_\_\_\_ Full-time or Part-time? (circle one)

College: \_\_\_\_\_ Dates: \_\_\_\_\_ Full-time or Part-time? (circle one)

College: \_\_\_\_\_ Dates: \_\_\_\_\_ Full-time or Part-time? (circle one)

College: \_\_\_\_\_ Dates: \_\_\_\_\_ Full-time or Part-time? (circle one)

**Additional Explanations:**

**NOTE:** If you attended college part-time or were not attending at all for any periods of time following high school graduation, please document your employment and military history during those times. If you were unemployed at any time, please list those dates as well. The NJCAA requires that we account for any time not enrolled full-time. Please use the space below. Please record months and years when referring to dates. \_\_\_\_\_

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**I understand that information falsified or omitted can make me ineligible for ALL future college competition in compliance with the National Junior College Athletic Association Eligibility Rules.**

Student-Athlete Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Coach Signature: \_\_\_\_\_ Date: \_\_\_\_\_



.....5DD9B8=L < ! =bhYfVæ`Y[ ]UhY`5h`Yh]Vg`  
.....7cbgYbh'hc`DUfh]VdUH`Zcf`Gh`XYbh`5h`YhYg`

I give my permission and understand that the athletic trainer, coaching staff, team physician, administrators, or other school officials can use their own judgment in applying first aid until medical help becomes available, or to secure medical aid and ambulance service in case parents cannot be reached. I voluntarily accept their service on my behalf and grant permission for them to perform their necessary duties as described above.

Name \_\_\_\_\_ Birth date \_\_\_\_\_ Student # \_\_\_\_\_  
Father: Day Phone \_\_\_\_\_ Mother: Day Phone \_\_\_\_\_  
Evening Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_  
Email \_\_\_\_\_ Email \_\_\_\_\_  
Medications currently taking: \_\_\_\_\_  
Known allergies (including medications): \_\_\_\_\_  
Medical conditions (diabetes, epilepsy, etc.): \_\_\_\_\_

Do you wear contact lenses/glasses?  yes  no

Any other medically related condition that may affect emergency care?

I \_\_\_\_\_ wish to participate in \_\_\_\_\_  
at Wallace Community College, Dothan, Alabama.

I am aware that the very nature of athletic participation carries with it an inherent risk of injury. I understand that the dangers and risks of participating in athletics, whether in competition or preparing to compete, include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the muscular skeletal system, and serious injury or impairment to other aspects of my body and general health and well being. In addition, I am aware that participation in intercollegiate athletics will involve traveling with the team, and that such traveling may expose me to the risks of a motor vehicle accident, as well as other conditions that result from traveling.

I also accept the responsibility in taking personal measures to help prevent injury to myself or other athletes by notifying the coaching staff, athletic trainer, administrators or other WCC personnel of conditions that I am aware of that may predispose me or other athletes to an increased risk of injury resulting from athletic participation.

Having understood the risks of athletic participation and particularly the risk inherent in \_\_\_\_\_  
**I voluntarily assume and accept these risks** as they have been explained above.

Student's signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's signature \_\_\_\_\_ Date \_\_\_\_\_

WALLACE COMMUNITY COLLEGE ATHLETICS  
1141 WALLACE DRIVE  
DOTHAN, AL 36303  
(334) 556-2416

**APPENDIX I**

**WALLACE COMMUNITY COLLEGE  
ATHLETIC DEPARTMENT**

Acknowledgment of the 2014-2015 Athletic Handbook:

I acknowledge receipt of a copy of the Athletic Handbook and have the rules of conduct. I understand the rules and realize that I am subject to disciplinary measures should I violate them. I do agree to participate and conduct myself in accordance with the rules of our Athletic Department and any other specific rules of the College or the coaches.

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**Printed Name**

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**Student Number**

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**Signature**

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**Sport**

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**Date**