

# Cornell College Sports Medicine Check List and Information

## FIRST YEAR AND TRANSFERS:

\_\_\_\_\_ You will be provided a physical form from Cornell College's Student Health Center. This physical form is for the **STUDENT HEALTH CENTER** and **NOT** for the sports medicine department. This physical must be returned to the Student Health Center on or before **July 31, 2009**. These forms can also be downloaded from the following website:

<http://www.cornellcollege.edu/student-health/newstudent-healthforms/index.shtml>

### For the Sports Medicine Department:

\_\_\_\_\_ **First year and transfer student-athletes** need to download and fill out the Sports Medicine Department's medical history form and athlete information form, and return it to the address listed on this form. This form must be completed and returned by the date listed on the chart below.

\_\_\_\_\_ Primary Insurance Card Copy Front and Back

\_\_\_\_\_ **If applicable**, any student athlete diagnosed with ADHD and taking medication must download the form for their primary physician (This form is found on the sports medicine forms site) to send in the proper medical information to the Sports Medicine Department. This is a NCAA mandate and must be followed.

## RETURNERS:

\_\_\_\_\_ **Returning student-athletes** will need to download the Sports Medicine Department's physical forms and return it to the address listed on this form. This includes the Athlete Information, History, Physical Examination, and Clearance Forms. Your physical forms must be completed and returned by the date listed on the chart below.

\_\_\_\_\_ Primary Insurance Card Copy Front and Back

\_\_\_\_\_ **If applicable**, any student athlete diagnosed with ADHD and taking medication must download the form for their primary physician (This form is found on the sports medicine forms site) to send in the proper medical information to the Sports Medicine Department. This is a NCAA mandate and must be followed.

All forms for participation in **Athletics** must be sent to (Remember for first year students to send your physical to STUDENT HEALTH):

**Eric Dybvig**  
**Head Athletic Trainer**  
**Cornell College**  
**600 1<sup>st</sup> St. SW**  
**Mount Vernon, IA 52314**

**ALL FRESHMAN AND TRANSFER PHYSICALS must be sent to the Student Health Center by JULY 31, 2009**

**ALL OTHER MEDICAL FORMS must be submitted to Cornell Sports Medicine by the dates listed below:**

**Medical forms for the below sports are due by July 31, 2009:**

Football  
Volleyball  
Women's Soccer  
Men's Soccer  
Women's Cross Country  
Men's Cross Country  
Women's Tennis  
Women's Golf

**Medical forms for the below sports are due by September 1, 2009:**

Softball (players who WILL be participating in fall softball)  
Baseball (players who WILL be participating in fall baseball)  
Women's Basketball  
Men's Basketball  
Wrestling  
Men's Golf (players who WILL be participating in fall golf)  
Men's Tennis (players who WILL be participating in fall tennis)

**Medical forms for the below sports are due by November 1, 2009:**

Women's Indoor Track & Field  
Men's Indoor Track & Field

**Medical forms for the below sports are due by January 1, 2010:**

Softball (players who did NOT participate in fall softball)  
Baseball (players who did NOT participate in fall baseball)  
Men's Tennis (players who did NOT participate in fall tennis)  
Men's Golf (players who did NOT participate in fall golf)

**Medical forms for the below sports are due by February 1, 2010:**

Women's Outdoor Track (athletes who did NOT participate in indoor track & field)  
Men's Outdoor Track (athletes who did NOT participate in indoor track & field)

## Other Information

### ***EMERGENCY CONTACT NAMES AND PHONE NUMBERS:***

-Please make sure to fill out this part of your medical history or physical forms. Provide us with the name, daytime or cell phone number, and relationship to you of your emergency contacts.

### ***INSURANCE:***

-All Cornell College student-athletes are required to have a primary insurance policy while participating in athletics at Cornell. ***You are required to show proof of this primary policy by attaching a copy of your insurance card to your medical history or physical form.*** Student-athletes will not be allowed to participate in any practice or competition until this insurance information has been provided. If you have an insurance plan that may not provide you coverage in the Mount Vernon, Iowa area you will be required to purchase an individual medical plan that will cover you during your competitive season. Please check with your primary insurance to ensure you have coverage while attending Cornell College. ***The supplemental health insurance offered by Student Health does not cover athletic injuries.*** Please call Eric Dybvig at 319-895-4009 or email [edybvig@cornellcollege.edu](mailto:edybvig@cornellcollege.edu) to refer you to an insurance agency that can assist you.

-You must make a copy of the ***front & back*** of your insurance card.

### ***CONCUSSION HISTORY:***

-This part **MUST** be filled out and signed by both the student-athlete and the parent/guardian of the student-athletes.

### ***SIGNATURES:***

-Please sign your medical history or physical form before you return it. If you are 18 years old or older, you do not need to have a parent or guardian sign your form. If you are under the age of 18 your parent or guardian must sign these forms.