

Coach: Sport: Month:

DAY	DATE	COMPETITION	PRACTICE	WEIGHTS/ CONDITIONING	MEETINGS	OTHER (Specify)	TOTAL HRS. PER DAY
Sunday							
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
TOTAL HOURS OF COUNTABLE ATHLETICALLY RELATED ACTIVITIES THIS WEEK:							

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Team Total Monthly Hours: In Season Out of Season

I certify the hours noted above are correct.

Head Coach:

(Date)

* See NCAA Bylaw 17.1.5

Please note: The following activities are not to be counted...

- Training table or competition-related meals
- Dressing, showering, taping, physical rehabilitation
- Study hall, tutoring
- Meetings with coaches on **non-athletic** matters
- Travel to and from practice and competition
- Medical exams or treatments
- Participation in regular P.E. classes
- **Voluntary** individual workouts and film review, provided they are not required by coaches; may be monitored by Conditioning Coach, for safety purposes
- Individual consultation with coach initiated by student, provided you do **not** engage in athletically related