KANSAS CITY PUBLIC SCHOOL DISTRICT

ATHLETIC HANDBOOK

2018-2019

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WELCOME

Welcome to Kansas City Public Schools Interscholastic League Athletics and Activities. We are excited that you are interested in our programs and we hope you will find them rewarding! Statistics show that involvement in school programs increase a student’s chances of academic success and social adjustment. In addition, there are multiple character traits built through extra-curricular activities that promote a successful life after high school. This handbook is designed as a guide for students, parents/guardians, coaches and administrators.

- Students, our goal is to provide a framework for successful participation in athletics and activities, outline our expectations of you as a student-athlete, and provide the necessary information and materials for meeting eligibility requirements. We do not encourage specialization in one sport or activity; rather, we encourage our student-athletes to experience a variety of sports as well as other school activities.

- Parents/Guardians, our goal is to help you become more informed and knowledgeable about eligibility, academic, and sportsmanship expectations for student-athletes attending KCPS. We hope the information provided within this handbook makes the student and parent experience with the Interscholastic League Athletic Programs more enjoyable.

- Coaches/Administrators, our goal is to provide a reference for consistency in coaching, directing, and supporting the student-athletes we serve. We encourage you to take advantage of the many opportunities offered through this guide as your time and talent permits while continuing to promote character development from sport to classroom.

**KCPS HIGH SCHOOLS**

Central Academy of Excellence  East High School  Lincoln College Preparatory Academy  Northeast High School  Paseo Academy of Fine and Performing Arts  Southeast High School

**KCPS MIDDLE SCHOOLS**

African-Centered Prep Lower Campus  Central Middle School  Foreign Language Academy  Lincoln College Preparatory Academy  Northeast Middle School  Paseo Academy of Fine and Performing Arts
KCPS Athletic/Activity Philosophy

The Kansas City Public School District (KCPS) athletic and activity philosophy is simple, we believe that student participation in any part of our programs is a privilege which carries with it responsibilities to the school, to the activity, to the student body, to the community, and to the student participant. Participation represents a complete commitment not only on the field/court but in the classroom as well.

KCPS Interscholastic Mission Statement

Our mission is to create and provide opportunities to develop students to reach their full potential in a positive, challenging, competitive, and safe environment while emphasizing sportsmanship and principles aligned with our district policies. We support you as you strive to grow emotionally, mentally, socially, and physically through our athletics and activities.
PARTICIPANT INFORMATION
KCPS Athletic Registration
All athletes, prior to participating in practice or competition must complete the registration process at their respective high school or middle school. This includes: 1) a current physical performed by a licensed doctor, 2) a signed training rules and expectation form, 3) proof of health insurance, and 4) a signed MSHSAA sportsmanship waiver by you and your parent/guardian. Registration forms provided in the athletic handbook can also be found on the KCPS website.

Eligibility Requirements
All student-athletes must abide by MSHSAA academic guidelines for eligibility. In addition, we hold our KCPS student-athletes to a higher standard and REQUIRE student-athletes have a minimum 2.0 cumulative Grade Point Average to participate in their desired sport. *Full implementation of the required 2.0 GPA will be enforced beginning in the 2019-2020 academic school year.* If an athlete wants to quit any sport, he or she should notify the coach and return all equipment. If an athlete quits a sport on their own accord, he/she will not be permitted to participate in another sport until the conclusion of that sport season that he/she quit. The exception to this is for an athlete to obtain written approval of the head coaches for both sports.

Students are expected to attend a minimum of half a school day to be eligible to participate in an activity. Exceptions are granted with administrative approval and/or district athletic office. These exceptions must be a documented excused absence and prior communication with the school, coach, and attendance office must be made by the student’s parent/guardian. Any exceptions being made in an emergency situation must be communicated between school administration and district athletic office before approval is given. Documentation of the decision and circumstances should be communicated to necessary parties and documentation must be detailed in the TYLER profile.

Sportsmanship and Disciplinary Actions
All student-athletes must sign the KCPS Expectation form prior to participating. Participants must abide by the sportsmanship and expectations for KCPS athletics. Student-athletes are also expected to:

- Strive to achieve sound citizenship and desirable social traits, including emotional control, honesty, cooperation, dependability, and respect for others and their abilities.

Any student-athlete that gets ejected from a game/match will not be allowed to participate in the following game. KCPS students are expected to show good sportsmanship to their team, coaches, opposing team, officials and fans. If further disciplinary actions are needed to be enforced, the situation will be discussed between the head coach, site athletic director, and the district athletic office.
Parent/Guardian Information
Parent/Guardian Sportsmanship and Expectations
Kansas City Public School District expectations for parents and/or guardians is to help create a positive, safe and friendly environment for student-athletes and spectators alike. Our goal is to model good character traits and citizenship to teach our kids. For a student-athlete to participate the required Parent/Guardian Activities contract will need to be signed. The head coach for each sport or activity will explain their own rules/expectations in the pre-season parent/guardian meeting. Those dates will be assigned by the head coach.

Student-Athlete Alternate Transportation
Kansas City Public School district provides transportation for student-athletes to and from their respective school during extra-circular activities. In certain instances, along with a signed document, students may be provided alternate transportation. The alternate transportation form must be signed by a parent/guardian 24 hours prior to the event and also approved and signed by the site Athletic Director.

**School policy may omit this provision and school administration must be consulted prior to any exceptions to be made.
Awards
**Lettering Policy**
For a student-athlete to be considered a lettered winner in their respective sport they must have played in 80 percent of all contests to be eligible. Coaches will submit a roster for the student-athletes that have qualified. The district athletic office will provide chenille paraphernalia for eligible student-athletes within the district. Schools and Sports may have additional requirements to be considered a Letter Winner. This criterion will be given to the parents/guardians in the sports packet during the seasonal sports meeting.

**Coaches do reserve the right to make exceptions to letter or withhold a letter from a participant. For this exception to be made the coach must submit a written explanation to school administration and the district athletics office detailing the reasons for the exception.**

**District Awards**
At the conclusion of a season the district coaches will meet to discuss all-conference awards and prepare the list for the district athletic office. An individual’s performance on the field/court is not the only attribute when deciding on awards. Other criteria taken in consideration are: sportsmanship, citizenship, and being a good teammate. The district athletic office will provide awards to the student-athletes. Academic All-Conference awards are also awarded to student-athletes that have displayed success in the classroom with a GPA equal to or higher than 3.2.
District Information
Facility Usage-Permits and Scheduled Transportation
The District athletic office works with an outside vendor to build schedules for athletic events through recommendations of each coach at the school. Coaches are encouraged to communicate with the site AD regarding desires for specific games/events. The site AD schedules the facility use permits for all KCPS events at their respective sites as well as transportation needs. It is required for security and custodial to be at events. In-season sports have first priority followed by regularly scheduled school activities. Off-season sports, youth sports and building rentals may schedule dates after the sports/activities have priority.

Any non-district stadium/court rentals must be scheduled through Nickia Griffin. All proper paperwork must be filled out 30 days prior to the event. There is no guarantee for district facility use and is dependent upon availability.
District Scheduler for outside KCPS use:
Nickia Griffin- ngriffin@kcpublicschools.org; 816-418-8210

Transportation
A participant shall not travel with a coach in his or her independent vehicle under any circumstance unless it has been approved by the district athletic office and parents/guardians of the student. In no case, should a coach/volunteer or employee of KCPS ever transport a student-athlete on a one-one ratio.

Should students choose to travel with their parents/guardians a travel request must be submitted to the site AD from the head coach PRIOR to travel to event/contest. The document must be signed by the parent/legal guardian of the student. A copy of the travel request form is listed in the back of the handbook.

Scheduling: Athletic Overnight Trips
All requests for tournaments and overnight trips must be approved by the administration at the school as well as the district athletic office prior to confirming your commitment. A request form must be submitted a minimum of sixty days prior to the game/event to the site AD and district athletic office.
The district athletic office will make a decision based on timeline, costs, and student welfare. Parent approval is needed for all overnight trips via a signed document.
*Exception: Teams or individuals who have qualified for MSHSAA play-offs, the 60-day requirement is not mandatory.

When financial advancements are received coaches have two business days from their return to turn in all receipts and extra cash.

League and Association Affiliation
All Kansas City Public High Schools are member of the Missouri State High School Activities Association (MSHSAA) and are bound to all rules and regulations required of MSHSAA and the Interscholastic League. KCPS high schools are in different classifications and MSHSAA district realigning occurs on a yearly basis dependent on the number of students.
**Fundraising and Promotions**
Branding KCPS Athletics and Activities is a priority for our district. We encourage coaches and Athletic Directors to be an advocate for their players. To assist in the promotion of our student-athletes as well as providing additional budget needs for your team it is highly recommended that each team host one (1) fundraiser each season or provide an external donation (i.e. applying for a grant). This will assist in purchasing items to supplement your team’s request. The Principal at your respective school as well as the district athletic office must be provided ample notice about details of the fundraiser and/or grant to provide approval for each team.

**Building Maintenance**
We want to ensure a safe environment for all our student-athletes and employees as well as fans. If one comes across a hazardous atmosphere or facility, please submit a work order with your building maintenance supervisor at your school.
Practice/Competition Information
Inclement Weather Policy
The district athletic office has the final decision whether games and activities shall be held. The decision will be based on the safety and well-being of the student-athletes and their ability for safe transportation from the athletic site to their school. On days of potential inclement weather, the district athletic office will make a final decision by 1:00 PM on the day of the scheduled event so that all personnel including coaches, parents/guardians, security, site administrator, athletic trainers, and transportation companies can adjust schedules accordingly. If the temperature or chill factor is below freezing all outside activities shall be cancelled for the well-being of student-athletes and employees. The policy will also apply to heat factors as well, and decisions will be made on a case by case basis in the best interest of the student-athletes and staff.

KCPS will abide by MSHSAA policy regarding scheduling of competitions.
In the event of a lightning strike:
Lightning – 30 minute delay from time of last lightning strike.
2nd lightning – reschedule of competition.

*If the game/event between two IL schools has met the required MSHSAA guidelines for a full competition the district athletic office reserves the right to make the decision when and if the rescheduling will occur.*

Security/Administration at Athletic Events
Security is required for all KCPS Athletic contests at each athletic contest. It is also mandatory for an administrator to be at athletic contests. Each Vice Principal, along with the site AD, is responsible for assigning these roles. It is the duty of the administrator at the game to make officials and the head coach aware they are the point of contact should an incident occur. It is the responsibility of the site administrator to report incidents to the district athletic office as soon as possible.
*In rare cases a site administrator may not be available and a current full-time faculty member may step in as an administrator. An administrator also coaching the team participating may NOT act as an administrator for the contest. The district athletic office has the form should this occur which must be signed by the Principal and the athletic director.*
**Admission Fees**

Admission to KCPS events are as follows:

*Applies to High School athletic activities only*

<table>
<thead>
<tr>
<th>Category</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults</td>
<td>$5.00</td>
</tr>
<tr>
<td>Students</td>
<td>$3.00</td>
</tr>
<tr>
<td>Senior Citizens (62 and older)</td>
<td>Free</td>
</tr>
<tr>
<td>Children (6 and under)</td>
<td>Free</td>
</tr>
<tr>
<td>Adult District Employee with District ID</td>
<td>Free</td>
</tr>
</tbody>
</table>

Parents and fans may purchase a one-time activity card that is valid for the current school year. It will allow entry into any high school athletic event located at an IL site. One may purchase an activity card from the athletic director at your respective high school or the district athletic office. *The card will not allow entry into games/matches outside of the district*.

**Athletic Activity Card:**
- Adult Athletic Activity Card: $75
- Student Athletic Activity Card: $45

*Single admission prices for tournaments and MSHSAA play-offs may differ. MSHSAA regulations state that activity passes CANNOT allow for admittance into play-off events.*

**Sports Offered**

Although most KCPS High Schools are consistent in their offering of athletic programs, some schools may differ. Below are the current listings.

**HS- High School**
**MS-Middle School**
**B,G-Boys and Girls**

<table>
<thead>
<tr>
<th>FALL</th>
<th>WINTER</th>
<th>SPRING</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cross Country-HS/MS (B,G)</td>
<td>Basketball-HS/MS (B,G)</td>
<td>Baseball-HS</td>
</tr>
<tr>
<td>Baseball-MS (Co-Ed)</td>
<td>Cheer/Dance-HS/MS</td>
<td>Flag Football-MS (Co-Ed)</td>
</tr>
<tr>
<td>Cheer/Dance- HS/MS</td>
<td>Swim-HS (G)</td>
<td>Soccer-HS (G)</td>
</tr>
<tr>
<td>Football-HS</td>
<td>Wrestling-HS/MS (B,G)</td>
<td>Soccer-MS (G)</td>
</tr>
<tr>
<td>Soccer-HS/MS (B)</td>
<td></td>
<td>Swim-MS (B,G)</td>
</tr>
<tr>
<td>Swim-HS (B)</td>
<td></td>
<td>Tennis-HS (G)</td>
</tr>
<tr>
<td>Tennis-HS (B)</td>
<td></td>
<td>Track and Field-HS/MS (B,G)</td>
</tr>
<tr>
<td>Volleyball-HS/MS</td>
<td></td>
<td></td>
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Employee Information
**Chain of Command**

It is vital that our organization has a chain of command to resolve any issues that arise. It is important to know who to contact if a situation occurs. The chain of command to resolve incidents is as follows:

- Assistant and Head Coaches report any and all issues to their Site Athletic Director
- Site Athletic Director report any and all issues to their Vice Principal responsible for athletics
- Vice Principal responsible for athletics report any and all issues to their Building Principal
- Building Principal report any and all issues to the District Athletic Office
- District Athletic Office report any and all issues to the Assistant Superintendent responsible for athletics
- Assistant Superintendent responsible for athletics reports any and all issues to the Superintendent of the District
- Superintendent of the District

If the building Principal and site athletic director are unable to resolve an issue, the district athletic office will become involved. In the most severe cases, the Assistant Superintendent for athletics and possibly the District Superintendent may become involved.

**Posting of Jobs/Hiring Process**

All job postings will be posted by the District Athletic office on the KCPS website for a minimum of 14 days. All applicants must fill out the proper paperwork to be eligible for the position. The site athletic director, Vice Principal responsible for athletics, and the building Principal (should they choose to be involved) will filter all applicants based on qualifications and create an interviewing committee. The committee will begin the interview process and narrow the field to two candidates for all head coaches and site athletic directors. All paperwork from the interview process shall be submitted to Donita Acklin at the district athletic office prior to the final round of interviews with the District and Associate AD. Following the second round interview the district athletic office will communicate with administration regarding their recommendation. The final procedure (recommendation to hire) will be submitted to human resources by the district athletic office.

Candidates must go through the Human Resource office for a final screening and background check. Coaching and AD positions are one year agreements and will be reviewed at the end of each school year.

Note: A coach may NOT work with any students until a full background check and coaching certification requirements have been completed.

**Athletic Coaching Requirements**

Each year, coaches must log onto the Missouri State High School Activities Association website and complete the online rules review before working with the student-athlete’s. CPR/AED training must be completed every two years. If an employee does not have a professional teaching certificate they must pass an online Fundamentals of Coaching Course on the National Federation of State High School Association website. This is a one-time requirement. Coaches must complete ALL requirements necessary and remain in good standing with MSHSAA.

Refer to the Coaching Requirement form at the back of the athletic handbook for mandated requirements.
Volunteer Coaches
Any person choosing to volunteer for a sport or activity must complete the proper paperwork and pass a background check prior to working with the student-athletes. Volunteer coaches must meet the MSHSAA requirements and remain in good standing. To begin the process to be a volunteer within the KCPS district refer to the following website: https://kcpublicschools.volunteermatters.org/register

Coaching Salaries
Interscholastic League Athletic Directors, head coaches, and assistants are paid on a pay scale dependent upon the sport. Payment will be made in installments throughout your sport season depending on the position. Each coach in a particular sport/activity must maintain active coaching status until the school’s last contest of the sport/activity to receive total compensation. To maintain active status, coaches must attend 90% of all practices, games and other team related events. Also, the team must play a minimum of 90% of their scheduled contests. Coaches that start coaching after the season has begun or who are not coaching when the season concludes will not receive full compensation. Compensation will be prorated, for coaches that do not maintain active coaching status throughout the sport/activity full term.

Game Workers
Paperwork from ticket sales and assigned workers must be submitted to the district athletic office within a 24-hour period. Pay scale for working contests is dependent on your status with KCPS. Certified and non-certified workers may vary.
*Gate workers must turn in paperwork and ticket sales money to the assigned officer or site director on duty.

Athletic Directors or Site Directors must submit the final score to MSHSAA within 1 hour following the competition. Scores must also be submitted to the local media outlets, including the Kansas City Star, following the contest.

Game Announcers- When announcers are present, MSHSAA requires sportsmanship PSA’s be read at all MSHSAA games a minimum of three times. Review the MSHSAA PSA announcements at the end of this handbook for further detail.
**Athletic Staffing**

The number of coaches allotted for each sport is based on the number of participants and teams at a KCPS high school. The following table represents the maximum number of salaried coaching positions allowed by the district athletic office.

<table>
<thead>
<tr>
<th>SPORT:</th>
<th>HS NUMBER OF TEAMS:</th>
<th>HS HEAD COACH:</th>
<th>HS ASSISTANTS:</th>
<th>MS NUMBER OF TEAMS:</th>
<th>MS HEAD COACH:</th>
<th>MS ASSISTANTS:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseball</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1 (co-ed)</td>
<td>0</td>
</tr>
<tr>
<td>Basketball (B)</td>
<td>3</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Basketball (G)</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Cheer/Dance</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Cross Country (B,G)</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Football</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>1 (Co-Ed flag)</td>
<td>0 (Co-Ed flag)</td>
</tr>
<tr>
<td>Soccer (B)</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Soccer (G)</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Swimming (B,G)</td>
<td>1</td>
<td>1</td>
<td>1 (district wide)</td>
<td>1</td>
<td>1 (district wide)</td>
<td>1 (per MS)</td>
</tr>
<tr>
<td>Tennis (B)</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Tennis (G)</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Track and Field</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Volleyball</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Wrestling</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

*Each program at the high school and middle school level may have more or less teams due to participation, academic eligibility, health of players, or budget concerns. The district athletic office reserves the right to increase or reduce the number of coaches on payroll due to the uncertainty of participation for each sport.*

During the first 15 days of practice the site AD is responsible to obtain weekly roster reports from the head coach to ensure span of control.

**Adding or Deleting Athletic Programs**

The number of athletic teams and programs offered in schools is a direct reflection of student participation and budget concerns. The district athletic office will have the final decision on the addition or reduction of entire athletic programs or activities.

**Reduction of Student-Athletes**

When there is a large capacity of student-athletes in a particular sport a coach may decide to reduce numbers for his/her team. In this instance an equitable try-out must occur using an objective rubric, similar to an evaluation chart, and filled out prior to any decisions being made. On request, a copy of the rubric should be given to the student-athlete after the try-out if he/she is eliminated from the sport or activity.
**Summer Participation**
All coaches and AD’s must abide by the MSHSAA regulations regarding contact days during the summer months. All fees associated with summer leagues must be approved by the district athletic office. Participants must have a current physical examination and health insurance on file. All participants must sign a release statement before participating in summer activities. Any violation of these policies will be handled on a case by case basis.

**Athletic Trainer Responsibilities**
Each high school will have a certified athletic trainer assigned to their respective school. It is the expectation for all student-athletes and coaches to respect the trainers. As an employee of the district it is your responsibility to communicate with trainers on a daily basis about your student-athletes medical condition. Athletic trainers are required to cover practices and home games for most high school/middle school sports.

The role of the athletic trainer is to provide assessment, prevention, and treatment for athletic injuries. The trainer has the best interest of the participant in mind. In cases where additional medical care is needed the athletic trainer will seek further medical attention for the student-athlete. If an athlete does not need immediate medical attention he or she will refer the student-athlete to their primary care physician or specialist. The certified athletic trainer makes the final decision regarding student-athlete participation in the result of a medical injury.

Each high school has an assigned location for the athletic training room to assist student-athletes in daily medical attention pre and post workouts/contests. Athletic trainers shall provide a weekly report to the coach, site athletic director, Vice Principal in charge of athletics, and the district athletic office in regards to medical injuries and current status via e-mail.

**Emergency Procedures**
The safety of our student-athletes and coaches remain a high priority. It is our role to provide a safe environment for athletic activities. In the case of an Emergency the athletic trainer is responsible for handling the situation. The athletic trainer will make final decisions for medical treatment and communicate the steps to be taken to the coach, athletic director on site, and the district athletic office.
**Athletic Director Responsibilities**

*An Athletic Director may only coach in one activity or sport during the school year.*

Site athletic directors are responsible for the active programs at their respective schools and overall requirements for coaches within the programs. Responsibilities include but not limited to:

1. Following policies, procedures from the Athletic Handbook as well as KCPS district policies and responsibilities.
2. Require and oversee that coaches have completed all MSHSAA requirements necessary.
3. Collecting head coaches bus transportation and permit needs in a timely manner.
4. Entering permits in “school dude” for activities/events occurring on your site (if competition is off-site the “home” team must enter the permit).
5. Schedule bus transportation for each sport – including practices and games at least five business days prior to the event/practice.
6. Weekly confirmations with schools/AD’s for all home and away contests occurring; sending out list of scheduled activities to coaches in your building as well as principals, district athletic office, and involved support staff.
7. Work with school administrators to ensure that there is a required administrator at all sporting events.
8. Collect paperwork from head coaches regarding required documentation for student participation.
9. Responsible for ensuring all student-athletes participating have sport physicals located in “Privit” providing access to the athletic trainer.
10. Oversee MSHSAA requirements necessary for each sport and confirm school is in good standing.
11. Collect all equipment inventory from coaches to be turned into the district athletic office two weeks after the completion of a team’s season.
12. List future needs, including equipment and uniform needs, Report to district athletic office two weeks after completion of a team’s season.
13. Attend mandatory monthly meetings with the district athletic office.
14. Communicate weekly with the district athletic office about roles, expectations of coaches, and occurrences if they have occurred.
15. Maintain eligibility reports for rosters and oversee that coaches are abiding by MSHSAA eligibility requirements.
16. Evaluate and document head and assistant coaches (minimum 3 occurrences) at practice and or games.
17. Responsible for supervision of all athletic coaches in the building.
18. Complete post-season evaluation of all head coaches.
19. Engage in professional develop and be knowledgeable about MSHSAA rules and/or rule changes.
Head Coach Responsibilities

*A coach may not be employed simultaneously in more than one sport within the same sport season.*

1. Follow all policies, procedures from the KCPS Athletic Handbook and meet all requirements as mandated by MSHSAA.
2. Responsible for ensuring assistant coaches and volunteers have completed certification requirements.
3. Enter in and remain current on all coaching responsibilities via the MSHSAA website. Examples include pitch count, contest outcomes, official evaluations.
4. Distribute and collect all equipment by providing an inventory list to the site AD at completion of season.
5. Work with the district athletic office and scheduler on your team’s schedule including recommendations for games/tournaments to attend. *Any contests/competitions further than 3 hours from Kansas City must be approved by the district athletic office*. 
6. Assist the site athletic director and vice principal responsible for athletics in the selection of assistant coaches.
7. Provide complete practice and game needs (permits and transportation) to the school AD.
8. Supervise assistant coaches on staff and provide support where needed
9. Provide end of season evaluation for assistant coaches.
10. Work closely with middle school teams and coaches by investing in their student-athletes.
11. Stay current on the latest coaching methods and attend professional development opportunities when available.
12. Supervise locker rooms and facilities before and after practices or contests.
13. Supervise safety (physically present) of players from the dismissal of school until he or she is picked up for transportation to and from all practices and games.
14. Encourage, challenge, and create a positive atmosphere for your student athletes on a daily basis.
15. Ensure stats and games are uploaded on Hudl (if applicable) and remain current throughout the season. Promote your student-athletes by actively seeking possible collegiate scholarships.
16. Report weekly roster to site AD the first 15 days of practice.
17. Report student-athlete’s physicals to site AD and ensure roster is current with MSHSAA eligibility standards. Refer to MSHSAA handbook and KCPS Athletic Registration section for all requirements.
18. Conduct a player/parent/guardian meeting prior to your first contest outlining expectations for players and parents/guardians, rules, team goals, medical procedures. Include parent/guardian expectation form to be signed and returned.
19. Be a liaison and form of communication for contact between student athletes and parents to inform of any changes throughout the season and off-season.
**Athletic Directors/Coaches Dress Code**

As adults and mentors to our student-athletes it is expected that all athletics staff set good examples of proper dress and represent KCPS in a respectable manner. During athletic contests dress code rules apply as follows:

Women: Closed toed shoes, covered shoulders, no low cut blouses, avoid extremely tight clothing, avoid short dresses and/or skirts.

Men: Khakis and a polo are allowed, no sweatpants, workout shorts, or travel team gear allowed on the sideline.

**Sportsmanship: Employees/Volunteers for KCPS**

Good sportsmanship is vital for our student-athletes, parents and/or guardians, as well as fans in attendance. It is our duty to provide a positive, safe, and encouraging environment for KCPS participants and to promote the core values of Kansas City Public School District. Expectations for good sportsmanship for anyone participating, coaching, or viewing a contest include but not limited to:

1. Cultivate awareness that participation in sports is a privilege and part of the educational process, therefore coaches should not seek nor expect athletes to receive academic favor.
2. Demonstrate respect for all student-athletes, coaches, officials, and fans alike.
3. Teach and follow all rules and guidelines governed by MSHSAA.
4. Display courtesy to visiting teams, spectators, and officials.
5. Exemplify self-control by not engaging in negative exchanges with the opposing team, coaches, or fans.
6. Model behavior you want your team, peers or players to follow.
7. Recognize that the purpose of athletics is to promote the physical, mental, social and emotional wellbeing of the individual players.

*If any employee or individual representing KCPS gets ejected from a game/match they will not be allowed to coach/participate/ or attend the next game. This also applies to play-off games as well. Technical fouls and/or reports to MSHSAA will be handled on a case by case basis and documented on file. *
Parent/Guardian Forms
# PRE-PARTICIPATION 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 a copy of this form in the chart for their records.)

<table>
<thead>
<tr>
<th>Date of Exam:</th>
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</thead>
<tbody>
<tr>
<td>Name:</td>
<td></td>
</tr>
<tr>
<td>Sex:</td>
<td></td>
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<tr>
<td>Age:</td>
<td></td>
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<tr>
<td>Grade:</td>
<td></td>
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<tr>
<td>School:</td>
<td></td>
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<tr>
<td>Sport(s):</td>
<td></td>
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<tr>
<td>Date of Birth:</td>
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</table>

**Medical Questions**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>1. Has a doctor ever denied or restricted your participation in sports for any reason?</td>
<td></td>
</tr>
<tr>
<td>2. Do you have any ongoing medical conditions? If so, please identify below:</td>
<td></td>
</tr>
<tr>
<td>- Asthma</td>
<td></td>
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<tr>
<td>- Anemia</td>
<td></td>
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<tr>
<td>- Diabetes</td>
<td></td>
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<tr>
<td>- Chronic infections</td>
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<tr>
<td>- Other:</td>
<td></td>
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<tr>
<td>3. Have you ever spent the night in the hospital?</td>
<td></td>
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<tr>
<td>4. Have you ever had surgery?</td>
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</tr>
<tr>
<td>5. Have you ever passed out or nearly passed out during or after exercise?</td>
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<tr>
<td>6. Have you ever had discomfort, pain, tightness, or pressure in your chest during exercise?</td>
<td></td>
</tr>
<tr>
<td>7. Does your heart ever race or skip beats (irregular beats) during exercise?</td>
<td></td>
</tr>
<tr>
<td>8. Has a doctor ever told you that you have any heart problems? If so, check all that apply:</td>
<td></td>
</tr>
<tr>
<td>- High blood pressure</td>
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<tr>
<td>- High cholesterol</td>
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<tr>
<td>- A heart murmur</td>
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<tr>
<td>- A heart infection</td>
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<tr>
<td>- Kawasaki disease</td>
<td></td>
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<tr>
<td>- Other:</td>
<td></td>
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<tr>
<td>9. Has a doctor ever ordered a test for your heart? (For example, ECG/EKG, echocardiogram)</td>
<td></td>
</tr>
<tr>
<td>10. Do you get light-headed or feel more short of breath than expected during exercise?</td>
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<tr>
<td>11. Have you ever had an unexplained seizure?</td>
<td></td>
</tr>
<tr>
<td>12. Do you get more tired or short of breath more quickly than your friends during exercise?</td>
<td></td>
</tr>
<tr>
<td>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)?</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td></td>
</tr>
<tr>
<td>15. Does anyone in your family have a heart problem, pacemaker, or implanted defibrillator?</td>
<td></td>
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<tr>
<td>16. Has anyone in your family had unexplained fainting, unexplained seizures, or near drowning?</td>
<td></td>
</tr>
</tbody>
</table>

**Bone and Joint Questions**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>17. Have you ever had an injury to a bone, muscle, ligament, or tendon that caused you to miss a practice or a game?</td>
<td></td>
</tr>
<tr>
<td>18. Have you ever had any broken or fractured bones or dislocated joints?</td>
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<tr>
<td>19. Have you ever had an injury that required x-rays, MRI, CT scan, injections, therapy, a brace, a cast, or crutches?</td>
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<tr>
<td>20. Have you ever had a stress fracture?</td>
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<tr>
<td>21. Have you ever been told that you have or have you had an x-ray for neck instability or atlantoaxial instabilities? (Down syndrome or dwarfism)</td>
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</tr>
<tr>
<td>22. Do you regularly use a brace, orthotics, or other assistive device?</td>
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</tr>
<tr>
<td>23. Do you have a bone, muscle, or joint injury that bothers you?</td>
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<tr>
<td>24. Do any of your joints become painful, swollen, feel warm, or look red?</td>
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<tr>
<td>25. Do you have any history of juvenile arthritis or connective tissue disease?</td>
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</tbody>
</table>

**Females Only**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>26. Have you ever had a menstrual period?</td>
<td></td>
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<tr>
<td>27. How old were you when you had your first menstrual period?</td>
<td></td>
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<tr>
<td>28. How many periods have you had in the last 12 months?</td>
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</tbody>
</table>

**Families Only**

Explain “Yes” answers below. Circle questions you do not know the answer to:

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

Explain “Yes” answers here:
I hereby state that, to the best of my knowledge, my answers to the above questions are complete and correct.

<table>
<thead>
<tr>
<th>Signature of Athlete:</th>
<th>Signature of Parent(s) or Guardian:</th>
<th>Date:</th>
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</table>
PRE-PARTICIPATION PHYSICAL EVALUATION
PHYSICAL EXAMINATION FORM

Name: __________________________ Date of Birth: __________________________

Physician Reminders:
1. Consider additional questions on more sensitive issues.
   - Do you feel stressed out or under a lot of pressure?
   - Do you ever feel sad, hopeless, depressed, or anxious?
   - Do you feel safe at your home or residence?
   - Have you ever tried cigarettes, chewing tobacco, snuff, or dip?
   - During the past 30 days, did you use chewing tobacco, snuff or dip?
   - Do you drink alcohol or use any other drugs?
   - Have you ever taken anabolic steroids or used any other performance supplements?
   - Have you ever taken any supplements to help you gain or lose weight or improve your performance?
   - Do you wear a seat belt, use a helmet, and use condoms?
2. Consider reviewing questions on cardiovascular symptoms (Questions 5-14).

EXAMINATION

Height: __________________________ Weight: __________________________

BP: __________________________/________________________ ( / )

Pulse: __________________________ Vision: R 20/ __________________________ L 20/ __________________________

Corrected: Yes No

MEDICAL

NORMAL

ABNORMAL FINDINGS

Appearance
- Marfan stigmata (kyphoscoliosis, high-arched palate, pectus excavatum, arachnodactyly, arm span>height, hyperlaxity, myopia, MVP, aortic insufficiency)

Eyes/Ears/Nose/Throat
- Pupils equal
- Hearing

Lymph Nodes

Heart*
- Murmurs (auscultation standing, supine, +/- Valsalva)
- Location of point of maximal pulse (PMI)

Pulses
- Simultaneous femoral and radial pulses

Lungs

Abdomen

Genitourinary (males only) **

Skin
- HSV, lesions suggestive of MRSA, tinea corporis

Neurologic***

MUSCULOSKELETAL

NORMAL

ABNORMAL FINDINGS

Neck

Back

Shoulder/arm

Elbow/forearm

Hip/thigh

Knee

Leg/ankle

Foot/toes

Functional
- Duck-walk, single leg hop

* Consider ECG, echocardiogram, and referral to cardiology for abnormal cardiac history or exam; **Consider GU exam if in private setting. Having third party present is recommended.
*** Consider cognitive evaluation or baseline neuropsychiatric testing if a history of significant concussion.

☐ Cleared for all sports without restriction.
☐ Cleared for all sports without restriction with recommendations for further evaluation or treatment for:

☐ Not Cleared
☐ Pending further evaluation
☐ For any sports
☐ For certain sports (please list):
  Reason:

Recommendations:
I have examined the above-named student and completed the pre-participation physical evaluation. The athlete does not present apparent clinical contraindications to practice and participate in the sport(s) as outlined above. A copy of the physical exam is on record in my office and can be made available to the school at the request of the parents. If conditions arise after the athlete has been cleared for participation, the physician may rescind the clearance until the problem is resolved and the potential consequences are completely explained to the athlete (and parents/guardians).

Name of Physician (type/print): ____________________________

Date: ____________________________

Address: ____________________________________________

Phone: ____________________________

Signature of Physician (MD/DO/ARNP/PA/Chiropractor): ____________________________
PRE-PARTICIPATION PHYSICAL EVALUATION

Missouri State High School Activity Association (MSHSAA) Eligibility and Authorization Statement

STUDENT AGREEMENT (Regarding Conditions for Participation)

This application to represent my school in interscholastic athletics is entirely voluntary on my part and is made with the understanding that I have studied and understand the eligibility standards that I must meet to represent my school and that I have not violated any of them.

I have read, understand, and acknowledge receipt of the MSHSAA brochure entitled “How to Maintain and Protect Your High School Eligibility,” which contains a summary of the eligibility rules of the MSHSAA. (I understand that a copy of the MSHSAA Handbook is on file with the principal and athletic administrator and that I may review it in its entirety, if I so choose. All MSHSAA by-laws and regulations from the Handbook are also posted on the MSHSAA website at www.mshsaa.org).

I understand that a MSHSAA member school must adhere to all rules and regulations that pertain to school-sponsored, interscholastic athletics programs, and I acknowledge that local rules may be more stringent than MSHSAA rules.

I also understand that if I do not meet the citizenship standards set by the school or if I am ejected from an interscholastic contest because of an unsportsmanlike act, it could result in me not being allowed to participate in the next contest or suspension from the team either temporarily or permanently.

I understand that if I drop a class, take course work through Post-Secondary Enrollment Option, Credit Flexibility, or other educational options, this action could affect compliance with MSHSAA academic standards and my eligibility.

I understand that participation in interscholastic athletics is a privilege and not a right. As a student athlete, I understand and accept the following responsibilities:

- I will respect the rights and beliefs of others and will treat others with courtesy and consideration.
- I will be fully responsible for my own actions and the consequences of my actions.
- I will respect the property of others.
- I will respect and obey the rules of my school and laws of my community, state, and country.
- I will show respect to those who are responsible for enforcing the rules of my school and the laws of my community, state, and country.

I have completed and/or verified that part of this certificate which requires me to list all previous injuries or additional conditions that are known to me which may affect my performance in so representing my school, and I verify that it is correct and complete.

Signature of Athlete: ___________________________ Date: __________

PARENT PERMISSION (Authorization for Treatment, Release of Medical Information, and Insurance Information)

Informed Consent: By its nature, participation in interscholastic athletics includes risk of serious bodily injury and transmission of infectious disease such as HIV and Hepatitis B. Although serious injuries are not common and the risk of HIV transmission is almost nonexistent in supervised school athletic programs, it is impossible to eliminate all risk. Participants must obey all safety rules, report all physical and hygiene problems to their coaches, follow a proper conditioning program, and inspect their own equipment daily. PARENTS, GUARDIANS, OR STUDENTS WHO MAY NOT WISH TO ACCEPT RISK DESCRIBED IN THIS WARNING SHOULD NOT SIGN THIS FORM. STUDENTS MAY NOT PARTICIPATE IN MSHSAA-Sponsored Sport WITHOUT THE STUDENT’S AND PARENT’S/GUARDIAN’S SIGNATURE.

I understand that in the case of injury or illness requiring transportation to a health care facility, a reasonable attempt will be made to contact the parent or guardian in the case of the student-athlete being a minor, but that, if necessary, the student-athlete will be transported via ambulance to the nearest hospital.

We hereby give our consent for the above student to represent his/her school in interscholastic athletics. We also give our consent for him/her to accompany the team on trips and will not hold the school responsible in case of accident or injury whether it be en route to or from another school or during practice or an interscholastic contest; and we hereby agree to hold the school district of which this school is a part and the MSHSAA, their employees, agents, representatives, coaches, and volunteers harmless from any and all liability, actions, causes of action, debts, claims, or demands of every kind and nature whatsoever which may arise by or in connection with participation by my child/ward in any activities related to the interscholastic program of his/her school.
If we cannot be reached and in the event of an emergency, we also give our consent for the school to obtain through a physician or hospital of its choice, such medical care as is reasonably necessary for the welfare of the student, if he/she is injured in the course of school athletic activities. We authorize the release of necessary medical information to the physician, athletic trainer, and/or school personnel related to such treatment/care. We understand that the school may not provide transportation to all events, and permit / do not permit (CIRCLE ONE) my child to drive his/her vehicle in such a case.

To enable the MSHSAA to determine whether the herein named student is eligible to participate in interscholastic athletics in the MSHSAA member school, I consent to the release of any and all portions of school record files to MSHSAA, beginning with seventh grade, of the herein named student, specifically including, without limiting the generality of the foregoing, birth and age records, name and residence address of parent(s) or guardian(s), residence address of the student, academic work completed, grades received, and attendance data.

We confirm that this application for the above student to represent his/her school in interscholastic athletics is made with the understanding that we have studied and understand the eligibility standards that our son/daughter must meet to represent his/her school and that he/she has not violated any of them. We also understand that if our son/daughter does not meet the citizenship standards set by the school or if he/she is ejected from an interscholastic contest because of an unsportsmanlike act, it could result in him/her not being allowed to participate in the next contest or suspension from the team either temporarily or permanently.

I consent to the MSHSAA's use of the herein named student’s name, likeness, and athletic-related information in reports of contests, promotional literature of the Association and other materials and releases related to interscholastic athletics.

We further state that we have completed that part of this certificate which requires us to list all previous injuries or additional conditions that are known to us which may affect this athlete’s performance or treatment and we certify that it is correct and complete.

The MSHSAA By-Laws provide that a student shall not be permitted to practice or compete for a school until it has verification that he/she has basic health/accident insurance coverage, which includes athletics. Our son/daughter is covered by basic health/accident insurance for the current school year as indicated below:

<table>
<thead>
<tr>
<th>Name of Insurance Company:</th>
<th>Policy Number:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Signature of Parent(s) or Guardian:</th>
<th>Date:</th>
</tr>
</thead>
</table>
PARENT AND STUDENT SIGNATURE (Concussion Materials)

I accept responsibility for reporting all injuries and illnesses to my school and medical staff (athletic trainer/team physician) including any signs and symptoms of a CONCUSSION. I have received and read the MSHSAA materials on Concussions, which includes information on the definition of a concussion, symptoms of a concussion, what to do if I have a concussion and how to prevent a concussion. I will inform my school and athletic trainer/team physician immediately if I experience any of these symptoms or if I witness a teammate with these symptoms. More information regarding concussion symptoms can be found at: http://www.mshsaa.org/resources/pdf/ConcussionPacketHB300_Final.pdf

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<tr>
<th>Signature of Athlete:</th>
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<table>
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<tr>
<th>Signature of Parent(s) or Guardian:</th>
<th>Date:</th>
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</table>

EMERGENCY CONTACT INFORMATION

<table>
<thead>
<tr>
<th>Parent(s) or Guardian</th>
<th>Address</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Contact</td>
<td>Relationship to Athlete</td>
<td>Phone Number</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Relationship to Athlete</td>
<td>Phone Number</td>
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</tbody>
</table>
MSHSSAA Student Expectation Form

As a member of the Missouri State High School Activities Association and it is our belief that interscholastic activities are an integral part of the secondary curricular program and an extension of the classroom. Our school’s program shall supplement the curricular program of the school and shall provide the most worthwhile experiences possible. These expectations shall result in learning situations that contribute to the development of the attributes necessary for good citizenship.

Fundamentals of High School Activities: When hosting an event, the opponent should be treated as guests and treated cordially. Officials should be recognized as impartial arbitrators who are trained to do their job with the best of their ability. Familiarity with the current rules of the game and the recognition of the necessity for a fair contest are essential. Sportsmanship requires one to understand his or her own bias and the ability to prevent the desire to win from overwhelming rational behavior. Applause for an opponent’s good performance is a demonstration of generosity and good will and should not be looked at negatively.

Expectations of Students: Your enthusiasm as a participant or spectator includes a vital responsibility for good sportsmanship. Your habits and reactions determine the quality of sportsmanship, which reflects upon our school and community. Students are expected to:

- Know and demonstrate the fundamentals of good sportsmanship. "Respect, cooperate and respond to cheerleaders.
- Respect school property and authority.
- Show respect for opponents and opposing coaches and fans.
- Show respect for players who are injured. "Respect the judgement and strategy of the coach (even if you disagree).
- Respect the judgement of game officials (even if you disagree).
- Avoid profane language and obnoxious behavior at all times.
- Avoid applauding errors or penalties of the opponents.
- Avoid heckling, jeering or distracting opponents, including distracting behavior during the shooting of free throws.
- Refrain from being critical of players, coaches or officials for a loss.
- Refrain from throwing objects on the playing area or in the bleachers.
- Avoid stomping of bleachers or the use of artificial noisemakers.
- Refrain from using cheers that taunt or ridicule opposing players, coaches, cheerleaders or spectators. "Refrain from booing or showing displeasure with game officials or game activities.

I certify that I have read and understand the above expectations and information related to sportsmanship. I understand that if I do not comply with the above listed responsibilities that I may forfeit my privilege of participating in the school.

Participant Signature: _____________________ Date: _____________________
Parental/Guardian Activities Contract

As a member of the Missouri State High School Activities Association, it is our belief that interscholastic activities are an integral part of the secondary curricular program and an extension of the classroom. Our school’s program shall supplement the curricular program of the school and shall provide the most worthwhile experiences possible. These expectations shall result in learning situations that contribute to the development of the attributes necessary for good citizenship.

Fundamentals of High School Activities: When hosting an event, the opponent should be treated as guests and treated cordially. Officials should be recognized as impartial arbitrators who are trained to do their job with the best of their ability. Familiarity with the current rules of the game and the recognition of the necessity for a fair contest are essential. Sportsmanship requires one to understand his or her own bias and the ability to prevent the desire to win from overcoming rational behavior. Applause for an opponent’s good performance is a demonstration of generosity and good will and should not be looked at negatively.

Expectations of Parents: Your enthusiasm as a spectator includes a vital responsibility for good sportsmanship. Your habits and reactions determine the quality of sportsmanship, which reflects upon our school and our community.

Parents are expected to:

- Know and demonstrate the fundamentals of good sportsmanship.
- Respect, cooperate and respond to cheerleaders.
- Respect school property and authority.
- Show respect for opponents and opposing coaches and fans.
- Show respect for players who are injured. Respect the judgement and strategy of the coach (even if you disagree).
- Respect the judgement of game officials (even if you disagree).
- Avoid profane language and obnoxious behavior at all times.
- Avoid applauding errors or penalties of the opponents.
- Refrain from heckling, jeering or distracting opponents, including distracting behavior during the shooting of free throws.
- Refrain from being critical of players, coaches or officials for a loss.
- Refrain from throwing objects on the playing area or in the bleachers.
- Avoid stomping of bleachers or the use of artificial noisemakers.
- Refrain from using cheers that taunt or ridicule opposing players, coaches, cheerleaders or spectators.
- Refrain from booing or showing displeasure with game officials or game activities.
- Refrain from approaching a coach to discuss the coach’s strategy or the playing time of a player immediately before, during or after a game. Please wait until the next day to contact a coach.
  - Parents must address any concerns with the coach’s approach directly with the coach, in respectful manner at an appropriate time (never on game day). If the concerns are then not addressed to the Parents’ satisfaction, they may then contact the athletic director to schedule an appointment to discuss any concerns with the coach, school athletic director, and principal responsible for athletics.

I certify that I have read and understand the above expectations and information related to sportsmanship. I understand that I am a role model for my son / daughter and that I represent our school and our community when I attend an activities function. I also understand that if I do not comply with the above listed responsibilities that I may forfeit my privilege of attending future activities involving our school.

Parental/Guardian Signature: ___________________________ Date: ________________________
**Athletic Training Room Rules and Expectation Form**

1. Athletes will be treated on a first come first serve basis on practice days. On game days away athletes will receive treatment first, followed by home game athletes, and lastly those who have practice.

2. If you make a mess, please clean up after yourself.

3. No shoes are to be placed or worn on the taping and treatment tables.

4. All equipment and personal belongings should be left outside the athletic training room.

5. Athletes must respect and be courteous to one another as well as the athletic training room staff.

6. No horseplay in the athletic training room---this can be dangerous.

7. No lounging, loitering, or swearing is allowed in the athletic training room.

8. Please do not take anything from the athletic training room without the permission of the certified athletic trainer.

9. Students may not go through desks, computers, cabinets, and closets without the permission of the certified athletic trainer.

10. All equipment (wraps, slings, braces, crutches, etc.) must be returned once they are no longer needed.

I have read and acknowledge that if I do not abide by the following training room rules and expectations I may be asked to leave and possibly be banned from future use.

**Student-Athlete Signature:** ___________________________  **Date:** ___________________________
KANSAS CITY HIGH SCHOOL ATHLETICS

Parental Permission Form for Alternative Transportation of Student Following Extra-Curricular Event

Kansas City Public School District provides transportation to and from extra-curricular activities. Students are expected to ride to and from extra-curricular activities with their team/group and coach/advisor unless this form is signed by the student’s parent/guardian and submitted to the High School Athletic Director 24 hours in advance of the event.

________________ (high school) will permit students to take alternative transportation from an adult only when this Permission Form is completed and approved by the Athletic Director 24 hours prior to the date of the event.

If this authorization is signed and approved, the student will be released from District supervision at the conclusion of the event. The District does not and cannot take responsibility for ensuring that the student rides in the particular vehicle authorized by the parent(s). Accordingly, parent(s)/guardian(s) take full responsibility to ensure that their sons or daughters in fact ride home with the person(s) whom they have authorized and that the alternative transportation is safe and appropriate.

Authorization and Release I/We, ____________________________________________, hereby give permission for

our (son/daughter name) ____________________________, to travel

from ________________ to ____________________________

on (date) ______________________ in a vehicle driven by ____________________________________________.

- - - THIS FORM IS VALID FOR ONE DATE ONLY - - -

I/We expressly decline the bus transportation made available to our son/daughter by KCPS. We have read this form in its entirety and acknowledge that Kansas City Public Schools has no responsibility to supervise or monitor our son/daughter following the conclusion of the event. I/We hereby agree to assume all risk of injury, harm or damage to our child’s person or property arising during or in connection with the alternate transportation. I/We have approved, and I/We hereby release and agree to indemnify and hold harmless Kansas City Public Schools, its directors, administrators, coaches, agents, and employees from any and all liability and claims of any kind or nature whatsoever for injury or harm to our child that may arise or occur during or in connection with said transportation.

Signature of Parent/Guardian: ___________________________________ Date: ________________

Signature of Site Athletic Director: _________________________________ Date: ________________
OVERNIGHT FIELD TRIP PERMISSION FORM
KANSAS CITY PUBLIC SCHOOLS

Student Name: __________________________  Date of Birth: ________________

School: ________________________________________________________________

Trip to: __________________________________  Dates: ______________________

- Your child’s participation in this activity is voluntary. Your written consent at the bottom of this form is necessary for your child to participate.
- This activity may potentially involve risks and responsibilities for your child that are beyond the scope of those normally associated with school functions. These may include travel, personal injury or damage to personal property. We encourage you to inquire in advance concerning the nature and details of this field trip and of any potential risks which will be assumed through your child’s participation. By signing below, you acknowledge that you have made yourself aware of any potential risks associated with this field trip and voluntarily and knowingly consent to your child participating.
- I understand that my student will be traveling in the personal car of Coach ______________, and that his/her individual automobile insurance policy will be the primary source of insurance coverage should any accident occur.
- The same rules of student conduct that apply to the behavior of students in school apply to the behavior of students while on a field trip. Students are expected to follow all directions and instructions given by the teachers or other chaperones on the trip. Failure to follow the rules of behavior, directions, or instructions may result in your child being sent home at your expense. Each student is responsible for their own belongings including but not limited to electronics and money.
- In the event of an accident or illness while on the field trip, you authorize the teachers or chaperones to take whatever action is deemed necessary in their judgment for the health of your child including, but not limited to, authorizing medical treatment, and agree to accept responsibility for the payment of any associated fees/charges.
- I hereby give permission for my student to attend the above-referenced field trip. I hereby release and hold harmless the Kansas City Public Schools, its Board Members, officers, agents, employees and authorized volunteers/chaperones from any and all liability, claims, demands and causes of action arising from my student’s participation in the above-referenced field trip.

____________________________________  __________________________________
Parent/Guardian Name  Parent/Guardian Signature/Date

___________________________________  _________________________________
Street Address  City/State/Zip

____________________________________
Student Signature if 18 or over
EMERGENCY CONTACT INFORMATION

Parent’s Home Phone: ______________ Work Phone: ____________ Cell Phone: ____________

Other Contact if Parent Unavailable: ________________________________________________

Relation to Student: ____________

Home Phone: ____________ Work Phone: ____________ Cell Phone: ____________

STUDENT MEDICAL INFORMATION

Student Name: __________________________________________________________

Parent/Guardian Name: _________________________________________________

Does this student have any medical issues, including allergies?  Yes____ No____

If yes, please explain: ______________________________________________________

___________________________________________________________________________

___________________________________________________________________________

If applicable, are Health History forms regarding medical issues, allergies, and medications for this student already on file with the school?  Yes__ No___.  Note: if these forms are needed, please contact the trip sponsor or the school.
How to Maintain and Protect
Your High School Eligibility
2018-2019

INTRODUCTION
• The Missouri State High School Activities Association (MSHSAA) is comprised of approximately 750 member schools, both public and private, across the state of Missouri. MSHSAA’s eligibility requirements have been voted on by the member schools and were adopted by your school when it became a MSHSAA member. Your school will also have local school requirements that you must comply with in order to be eligible.
• Information contained on this page will acquaint you with the essential rules and regulations students and schools must follow in order to maintain and protect high school eligibility. No one requirement is more important than another. Any questions you have concerning these essential requirements or eligibility should be discussed with the school principal or athletic director. The MSHSAA Handbook is also available on the MSHSAA website.

ELIGIBILITY REQUIREMENTS
1. Bona Fide Student
• In order to represent your school, you must be a bona fide student and meet all eligibility requirements. You must be regularly attending classes and you must meet the academic requirements in MSHSAA By-Law 2.3 and those of your school.

2. Citizenship
• You must be a creditable citizen. Creditable citizens are those students whose conduct—both in school and out of school—will not reflect discredit upon themselves or their school.

NOTE: Conduct involving law enforcement must be reported to your principal or athletic director immediately as your conduct may affect eligibility or contest outcomes. Failure to immediately report issues to your school will result in an automatic 365 days of ineligibility.

3. Sportsmanship
• If you commit an unsportsmanlike act while participating in an event, you could become ineligible.
• If your conduct as a spectator is found to be unsportsmanlike, you could be barred from attending any further high school contests.

4. Academics
   GRADES 9-12
   • You must have earned, the preceding semester of attendance, a minimum of 3.0 units of credit or have earned credit in 80% of the maximum allowable classes in which any student can be enrolled in the semester, whichever is GREATER, at your school.
   • For your current semester, you must be enrolled in and regularly attending courses that offer 3.0 units of credit or 80% of the maximum allowable credits, which may be earned at your school, whichever is GREATER.
   • Credits earned or completed after the close of the semester will not fulfill this requirement. Summer high school courses for FALL academic eligibility may count provided the course is necessary for graduation or promotion or is a core subject course, and credit is placed on the school transcript. No more than one unit of credit in summer school shall be counted toward fall eligibility.
   • Students promoted for the first time into 9th grade are considered academically eligible for the first semester after promotion.
   • Do not drop courses without first consulting with your school principal, athletic director or counselor to determine whether doing so will affect your eligibility.

   GRADES 7-8
• You must be enrolled in a normal course load for your grade at the member school.
• You will be ineligible if you failed more than one class the previous grading period.
• You must have been promoted to a higher grade prior to the first day of classes for the new school year.
• Students promoted for the first time into 7th grade are considered academically eligible for the first grading period after promotion.

5. Semesters of Participation

GRADERS 9-12
• You are eligible to participate in any sport for a maximum of four seasons. Any part of a contest played during a season counts as a season of participation.
• Your eligibility to participate in high school activities begins when you first enter the 9th grade and lasts for the next eight consecutive semesters (four consecutive years).

GRADERS 7-8
• You are eligible for only your first two semesters of attendance in the 7th grade and for only your first two semesters in the 8th grade.
• You are not eligible to compete with or against students enrolled in the 10th grade or above when you are enrolled in either the 7th or 8th grade.

6. Age Limits

GRADERS 9-12
• If you reach 19 years of age prior to July 1, you will be ineligible the next school year.
• Over-aged 8th graders should be moved up to the senior high team to have eight semesters eligibility.
• Over-aged 6th graders should be moved up to the 7th grade team to participate, because they will be ineligible as seniors.

GRADERS 7-8
• In order to participate on or against teams made up of only 7th-graders, you must not have reached 14 years of age prior to July 1 preceding the opening of school.
• In order to participate on or against teams made up of only 8th-graders, you must not have reached 15 years of age prior to July 1 preceding the opening of school.
• In order to participate on or against teams made up of only 9th-graders (freshman teams), you must not have reached 16 years of age prior to July 1 preceding the opening of school.
• Students may participate with the next higher grade team if they no longer meet the age limit for their grade.

7. Entering School
• You must enter school within the first 11 days of the semester in order to be eligible that semester.

8. Recruiting of Athletes
• You will be ineligible for your career at a school if you are influenced by a person to attend that school for athletic or activities purposes. You may, however, return to your original school and be ineligible for no more than 365 days.

9. Playing Under a False Name
• If you compete under a false name, you immediately become ineligible for up to 365 days.

10. Amateur and Awards Standards
• An athlete must maintain “amateur standing” 365 days in a year in the sport concerned in order to participate in interscholastic athletics- the following restrictions govern the receipt of awards in both interscholastic play AND non-school competition/participation.
• After entering a member school, you will become ineligible in the sport concerned if you receive any of the following PROHIBITED awards for participating in an athletic contest or being an athlete:
  o An award of cash, a gift-certificate/gift-card or an award that is the equivalent of cash is PROHIBITED for amateurs.
  o Merchandise which exceeds a manufacturer’s suggested retail price (MSRP) of $250 is PROHIBITED for amateurs. However, there is no value limit in regard to awards which are symbolic in nature, such as medals, ribbons, trophies, plaques, etc.
• Awards should be approved in advance by our school.
• Commemorative jewelry may be presented by the school (i.e. championship ring or necklace) (no value limit).

NOTE: Check with your school or principal or athletic director for options available to you if you are ineligible for your grade level because of age.
11. Non-School Competition
- You must receive approval in advance from your school principal or athletic director in order to miss school time to practice for, travel to or compete in organized non-school athletic competition.
- You will become ineligible in any sport in which you play as a member of a junior college, university or college team.
- Before you join a non-school team or enter any non-school competitive athletic event, your school principal or athletic director should be consulted to make certain your participation will not jeopardize your interscholastic eligibility.

12. Contact with Coaches

No-Contact Periods
- All Sports: The seven days prior to the first allowable practice date for each season is a no-contact period in which no “contact” takes place between school coaches and students enrolled in the member school, or who will be enrolled in the member school during the upcoming school year.

Sport-Specific Instruction
- Before attending any specialized athletic sport instruction, you should consult with your school principal or athletic director to make sure it meets the criteria published in the MSHSAA Official Handbook.
- You or your parents must pay all camp/clinic fees, tuition and other related expenses. A scholarship or waiver of fees shall result in the loss of your eligibility. The school may provide transportation at no cost during the summertime or during the school sport season.

13. College Auditions and Tryouts
- You may participate in an event conducted by a college or university during the school year under certain conditions. Consult your athletic director.
- You may participate in a college tryout, audition or evaluation event conducted by a private organizer for a specific sport outside the school season of the sport concerned.
- You may not miss school time to travel to or participate in the event unless your absence is approved in advance by the school administrator.

14. Residence Requirements
- A student may be eligible at the public or nonpublic school located in the district in which the student’s parents reside. In the case of a public multiple-school district, a student may be eligible at the school designated for the student to attend, based on parents’ residence, by the board of education.

15. Transferring Schools
- If you transfer schools, you will be ineligible for 365 days, unless your circumstances meet one of the ten exceptions listed in the MSHSAA Residence and Transfer Rules (By-Law 3.10). Make an appointment with the school’s athletic director to review these exceptions.
- You shall become ineligible for 365 days if you transfer to another school for athletic reasons.

16. Graduated Students
- You will be ineligible to participate after graduation from a senior high school or its equivalent. Students who are granted an early release after their junior year are ineligible for further participation. (NOTE: You are eligible to participate in state-series events which extend beyond the date of your school’s graduation at the end of the spring semester of your senior year.
Employee Forms

NOTE: *For additional forms required for athletic purposes refer to the District Athletic office.
MSHSAA Concussion Return to Play Form

This form is adapted from the Acute Concussion Evaluation (ACE) care plan on the CDC website (www.cdc.gov/injury). All medical providers are encouraged to review this site if they have questions regarding the latest information on the evaluation and care of the scholastic athlete following a concussion injury. Please initial any recommendations that you select below.

Athlete’s Name: ________________________________
Date of Birth: ________________________________
Date of Injury: ________________________________

---

THIS RETURN TO PLAY IS BASED ON TODAY’S EVALUATION

Date of Evaluation: ________________________________ Care Plan Completed By: ________________________________
Return to This Office (Date/Time): ________________________________
Return to School On (Date): ________________________________

RETURN TO SPORTS

PLEASE NOTE:

1. Athletes should not return to practice or play for at least 24 hours after their head injury has occurred.
2. Athletes should never return to play or practice if they still have ANY symptoms.
3. Athletes: Be sure that your coach and/or athletic trainer are aware of your injury and symptoms, and that they have the contact information for the treating physician.

The following are the return to sports recommendations at the present time:

Physical Education: □ Do NOT return to PE class at this time.
                   □ May return to PE class at this time.
Sports:            □ Do NOT return to sports practice or competition at this time.
                   □ May gradually return to sports practices under the supervision of the healthcare provider for your school or team.
                   □ May be advanced back to competition after phone conversation with attending physician (MD/DO/PAC/ATC/ARNP/Neurophysiologist)
                   □ Must return to physician (MD/DO/PAC/ATC/ARNP/Neurophysiologist) for final clearance to return to competition.
                   - OR -
                   □ Cleared for full participation in all activities and restrictions. Return of symptoms should result in re-evaluation by physician (MD/DO/PAC/ATC/ARNP/Neurophysiologist) for assessment.

Medical Office Information (Please Print/Stamp):
Evaluator’s Name: ________________________________ Office Phone: ________________________________
Evaluator’s Signature: ________________________________
Evaluator’s Address: ________________________________
Return to Play (RTP) Procedures After a Concussion

1. Return to activity and play is a medical decision. The athlete must meet all of the following criteria in order to progress to activity:

   Asymptomatic at rest and with exertion (including mental exertion in school) AND have written clearance from their primary care provider or concussion specialist (athlete must be cleared for progression to activity by a physician other than an Emergency Room physician, if diagnosed with a concussion.

2. Once the above criteria are met, the athlete will be progressed back to full activity following the step-wise process detailed below. (This progression must be closely supervised by a Certified Athletic Trainer. If your school does not have an athletic trainer, then the coach must have a very specific plan to follow as directed by the athlete’s physician).

3. Progression is individualized, and will be determined on a case by case basis. Factors that may affect the rate of progression include: previous history of concussions, duration and type of symptoms, age of the athlete, and sport/activity in which the athlete participates. An athlete with a prior history of concussion, one who has had an extended duration of symptoms, or one who is participating in a collision or contact sport may be progressed more slowly.

4. Stepwise progression as described below:

   a. Step 1: Complete cognitive rest. This may include staying home from school or limiting school hours (and studying) for several days. Activities requiring concentration and attention may worsen symptoms and delay recovery.
   b. Step 2: Return to school full-time.
   c. Step 3: Light exercise. This step cannot begin until the athlete is no longer having concussion symptoms and is cleared by a physician for further activity. At this point the athlete may begin walking or riding an exercise bike. No weight-lifting.
   d. Step 4: Running in the gym or on the field. No helmet or other equipment.
   e. Step 5: Non-contact training drills in full equipment. Weight-training can begin.
   f. Step 6: Full contact practice or training.
   g. Step 7: Play in game. Must be cleared by physician before returning to play.

- The athlete should spend 1 to 2 days at each step before advancing to the next. If post-concussion symptoms occur at any step, the athlete must stop the activity and the treating physician must be contacted. Depending upon the specific type and severity of the symptoms, the athlete may be told to rest for 24 hours and then resume activity at a level one step below where he or she was at when the symptoms occurred.
MSHSAA Public Service Announcements Guidelines

*Must be read at all MSHSAA events a minimum of three times. Can be single announcement or a combination of any PSA’s.

MSHSAA PSA ANNOUNCEMENT — 30 SECONDS TONIGHT’S GAME IS NOT ONLY A COMPETITIVE CONTEST BETWEEN THESE TWO SCHOOLS, BUT IT’S ALSO AN EDUCATIONAL EXPERIENCE FOR THE STUDENTS INVOLVED. BECAUSE HIGH SCHOOL ACTIVITIES ARE ABOUT LEARNING LIFE VALUES, YOUR FRIENDS AT ___________ (radio/tv/school) AND THE MISSOURI STATE HIGH SCHOOL ACTIVITIES ASSOCIATION REMIND EVERYONE TO DO THEIR PART IN KEEPING OUR HOMETOWN SPORTS A POSITIVE EXPERIENCE FOR EVERYONE. WHEN YOU ATTEND YOUR NEXT GAME, DO YOUR PART TO HELP REKINDLE THE SPIRIT OF CITIZENSHIP BY SHOWING GOOD SPORTSMANSHIP. YOU’LL BE TEACHING A POSITIVE LESSON AND YOU’LL BE PRESERVING A PROUD TRADITION IN THE STATE OF MISSOURI.

* * * * * * *

MSHSAA PSA ANNOUNCEMENT — 30 SECONDS WHETHER ITS BALLS AND STRIKES, FOULS OR FLAGS, YOUR REFEREES AND GAME OFFICIALS ARE A VITAL PART OF HIGH SCHOOL ATHLETICS. IF YOU’VE EVER TRIED YOUR HAND AT OFFICIATING, YOU KNOW HOW HARD THESE MEN AND WOMEN WORK, AND YOU CERTAINLY KNOW THAT THEY WOULD NEVER MISS A CALL INTENTIONALLY. KEEP THESE THINGS IN MIND AS YOU ATTEND SPORTING EVENTS. AFTERALL, RESPECTING OFFICIALS AND AUTHORITY FIGURES IS ONE OF THE MOST VALUABLE LESSONS THAT WE CAN TEACH OUR STUDENTS. THIS MESSAGE HAS BEEN BROUGHT TO YOU BY YOUR FRIENDS AT ___________ (radio/tv/school) AND THE MISSOURI STATE HIGH SCHOOL ACTIVITIES ASSOCIATION.

* * * * * * *

MSHSAA PSA ANNOUNCEMENT — 30 SECONDS FANS, WHEN YOU ATTEND A HIGH SCHOOL GAME, DO YOU STAND AT ATTENTION DURING THE NATIONAL ANTHEM? DO YOU CHEER A GOOD PLAY BY THE OPPOSING TEAM? IF YOUR TEAM LOSES, DO YOU TAKE IT WELL IN STRIDE? IF YOU ANSWERED ‘YES’ TO ANY OF THOSE QUESTIONS, YOU ARE SHOWING POSITIVE EXAMPLES OF SPORTSMANSHIP. DON’T FORGET THAT WHEN YOU ATTEND HIGH SCHOOL EVENTS, YOUNG EYES ARE WATCHING YOU FOR EXAMPLES OF ACCEPTABLE BEHAVIOR. BY MAKING A CONSCIOUS EFFORT, YOU’LL BE HELPING OUR STUDENTS GROW INTO BETTER CITIZENS. THIS MESSAGE WAS BROUGHT TO YOU BY YOUR FRIENDS AT THE MISSOURI STATE HIGH SCHOOL ACTIVITIES ASSOCIATION AND ___________ (radio/tv/school).

* * * * * * *

MSHSAA PSA ANNOUNCEMENT — 30 SECONDS ROLE MODELS ARE MORE IMPORTANT THAN EVER IN TODAY’S SOCIETY. YOU CAN SERVE AS A ROLE MODEL FOR OTHERS THE NEXT TIME YOU DISPLAY GOOD SPORTSMANSHIP AT A HIGH SCHOOL ATHLETIC EVENT. GOOD SPORTS ARE WINNERS AND ARE ALSO VITAL TO PRESERVING OUR FINE SPORTS TRADITIONS. SO THE NEXT TIME YOU ATTEND A SPORTING EVENT, REMEMBER TO BE A GOOD SPORT AND HELP REKINDLE THE SPIRIT OF CITIZENSHIP! THIS MESSAGE WAS BROUGHT TO YOU BY YOUR FRIENDS AT THE MISSOURI STATE HIGH SCHOOL ACTIVITIES ASSOCIATION AND ___________ (radio/tv/school).

* * * * * * *

Kansas City Public Schools Athletic Scholarships Received

High School: ___________________________ Year: ______________

Please list below any student-athlete who received a scholarship

<table>
<thead>
<tr>
<th>Students Name:</th>
<th>Sport:</th>
<th>Athletic or Academic Award:</th>
<th>Monetary Amount:</th>
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Kansas City Public Schools Athletics- Inventory

School: ___________________________________ Sport: __________________________ Year: ______________

Coach: __________________________ Number of Athletes: ______________

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<th>Item (Uniforms, Materials):</th>
<th>Quantity:</th>
<th>Year Received:</th>
<th>Condition (good, average, poor)</th>
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<thead>
<tr>
<th>Item: (physical items EX-football sled, balls)</th>
<th>Quantity:</th>
<th>Year Received:</th>
<th>Condition (good, average, poor)</th>
<th>Location Stored:</th>
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REQUIREMENTS TO SERVE
AS A
NON-FACULTY ATHLETIC COACH

Levels of Certification
A. Full Professional Teacher’s Certificate
B. 4-Year College Degree & Substitute Teacher’s Certificate
C. Minimum of 60 College Hours & Substitute Teacher’s Certificate
D. Less than 60 College Hours/No College Hours (no level of certification) & Background Check

<table>
<thead>
<tr>
<th>Head Athletic Coach</th>
<th>NFHS Fundamentals of Coaching</th>
<th>First Aid Requirement Met</th>
<th>MSHSAA Constitution &amp; By-Laws</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>N/A (not required)</td>
<td>Prior to approval</td>
<td>N/A (not required)</td>
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<tr>
<td>B</td>
<td>Prior to approval</td>
<td>Prior to approval</td>
<td>Prior to approval</td>
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<tr>
<td>C</td>
<td>Only after being approved as a non-faculty assistant coach for any two prior years by MSHSAA.</td>
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<td>D</td>
<td>CANNOT SERVE AS A HEAD ATHLETIC COACH</td>
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<thead>
<tr>
<th>Assistant Athletic Coach</th>
<th>NFHS Fundamentals of Coaching</th>
<th>First Aid Requirement Met</th>
<th>MSHSAA Constitution &amp; By-Laws</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>N/A (not required)</td>
<td>*Required during the first year</td>
<td>N/A (not required)</td>
</tr>
<tr>
<td>B</td>
<td>*Required during the first year</td>
<td>*Required during the first year</td>
<td>*Required during the first year</td>
</tr>
<tr>
<td>C</td>
<td>*Required during the first year</td>
<td>*Required during the first year</td>
<td>*Required during the first year</td>
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<tr>
<td>D</td>
<td>ONLY APPROVED THROUGH A HARDSHIP APPLICATION</td>
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*NOTE: If Coaches’ Education is not completed before the beginning of the second year of coaching, the coach will not be approved.*
Site Athletic Director Evaluation Form

School_____________________________________
Athletic Director Name________________________
Athletic Principal_______________________

Outstanding (4)  Satisfactory (3)  Improvement (2)  Unsatisfactory (1)  N/A (N/A)
Needed

Administrative Responsibilities:

_____ Communicates with principal(s) at school and provides paperwork (physicals/rosters/MSHSAA responsibilities prior to first day of practice.
_____ Communicates with head coaches regarding roles and expectations.
_____ Communicates with parents in an effective, and consistent manner.
_____ Oversees all school coaches abide by all MSHSAA rules and regulations regarding sports/activities. (including official recommendations/proper team and individual records)
_____ Submits proper paperwork to district office regarding inventory and turning in of equipment in a timely manner.
_____ Submits paperwork to district office regarding yearly scholarships and scholarship dollars for student athletes at the end of the school calendar year.
_____ Attends practice and games to effectively evaluate coaches.
_____ Accountable for all school facilities and equipment demonstrating respect for all.
_____ Communicates with head coaches and athletic trainer regarding student-athletes and progress regarding injury assessment.
_____ Has end of season evaluation meetings with each head coach within two weeks of completing his/her season.
_____ Requires head coach to properly evaluate his/her assistant coaches the week after season is completed.
_____ Responsible for turning in all end of season evaluation paperwork (head coaches and assistants)
_____ Turns in payroll certification forms for each season.
_____ Enters in “school dude” permits in for athletics/activities in respective school.
_____ Schedules transportation needs for each sport/activity.
_____ Attends monthly athletic director meetings at the district office.

Professional Qualities/Relationships:

_____ Demonstrates an enthusiasm for working with coaches and student-athletes.
_____ Oversees the academic progress for each student-athlete and confirms all reliability abiding by MSHSAA and KCPS handbook regulations.
_____ Has a good rapport with coaches, student-athletes, trainers, and all involved with the program.
_____ (HS coaches only) Works with coaches at lower levels to promote the high school programs.
_____ Involved in professional development each year (ex-athletic director conference).
_____ Athletes are demonstrating a level of success and improvement as the year progresses.
_____ Promotes all school activities and encourages students to participate in a variety of activities.
General Overview Assessment: (Circle corresponding number)

Outstanding (4)
Satisfactory (3)
Improvement Needed (2)
Unsatisfactory (1)

**For any answer that needing improvement or unsatisfactory please provide additional information for each line item**

__________________________________________________________________________________________________

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District Athletic Director Additional Comments:

__________________________________________________________________________________________________

__________________________________________________________________________________________________

__________________________________________________________________________________________________

District AD Signature: ________________________ Date: __________________

Associate AD Signature: ________________________ Date: __________________

Vice Principal Signature: ________________________ Date: __________________

Site AD Signature: ______________________________ Date: __________________
Head Coach Pre-Season and Post-Season Self-Assessment

COACH: ________________________ SPORT: ________________________ DATE: ________

HEAD COACH: PRESEASON ASSESSMENT GOALS FOR SELF AND TEAM: (provide at least 3 goals)
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
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POSTSEASON: DATE: ______________
Assess your team’s performance this season.
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

Assess your performance as a head coach this season.
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

What are your team goals for next season?
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

What are your personal goals as a head coach next season?
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

What suggestions or recommendations do you have for your administrative staff and the district athletic office that can help you achieve your team and personal goals?
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
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HC Signature: ________________________ AD Signature: ________________________ Date: ________________
# Head Coach/Sponsor Evaluation Form

<table>
<thead>
<tr>
<th>School:</th>
<th>Sport/Activity:</th>
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| Head Coach/Sponsor Name: | Athletic Director: |

<table>
<thead>
<tr>
<th>Outstanding (4)</th>
<th>Satisfactory (3)</th>
<th>Improvement (2)</th>
<th>Unsatisfactory (1)</th>
<th>N/A (N/A)</th>
</tr>
</thead>
</table>

## Administrative Responsibilities:

- [ ] Communicates with AD at school and provides paperwork (physicals/rosters/MSHSAA responsibilities prior to first day of practice.
- [ ] Communicates with assistant coaches regarding roles and expectations.
- [ ] Communicates with parents and players in an effective, and consistent manner.
- [ ] Holds a parent/player meeting prior to season starting to discuss rules and expectations for all.
- [ ] Abides by all MSHSAA rules and regulations regarding your sport/activity. (including official recommendations/proper team and individual records)
- [ ] Submits proper paperwork to AD regarding inventory and turning in of equipment in a timely manner after season is completed.
- [ ] Holds an athletic banquet to honor awards and team success at the conclusion of season.
- [ ] Creates responsible practice plans on a daily basis (including individual and team goals).
- [ ] Supervises practice and play area. Demonstrates responsibility for all student-athletes to ensure their safety.
- [ ] Accountable for all school facilities and equipment demonstrating respect for all.
- [ ] Communicates with the Athletic trainer regarding student-athletes and their progress regarding injury assessment.

## Professional Qualities/Relationships:

- [ ] Demonstrates an enthusiasm for working with high school/middle school student-athletes.
- [ ] Demonstrates a vested interest in the student-athlete both on and off the field/court (grades/personal well-being).
- [ ] Has a good rapport with coaches, student-athletes, trainers, and all involved with the program.
- [ ] Teams performance reflect enthusiasm, motivation, fundamentals, and sportsmanship.
- [ ] Maintains effective individual and team discipline at practice and in games.
- [ ] Teaches the fundamental philosophy, skills, and knowledge essential to the sport/activity.
- [ ] Constructs practice/workouts in a prompt and timely manner.
- [ ] (HS coaches only) Works with coaches at lower levels to promote the high school program and ensuring what is taught will be taught in your program.
- [ ] Involved in professional development each year (ex-coaching clinics/publications).
- [ ] Athletes are demonstrating a level of success and improvement as the year progresses.
- [ ] Works with student-athletes in the off-season (conditioning/weight room).
- [ ] Promotes all school activities and encourages students to participate in a variety of activities.
- [ ] Praises student athletes for positive performance and offers constructive criticism when needed to improve performance.
General Overview Assessment: (Circle corresponding number)

Outstanding (4)
Satisfactory (3)
Improvement (2)
Unsatisfactory (1)

**For any answer that needing improvement or unsatisfactory please provide additional information for each line item**

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Athletic Director Additional Comments:

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__________________________________________________________________________________________________

HC Signature: ______________________ Site AD Signature: ______________________ Date: ______________
Assistant Coach/Sponsor Evaluation Form

School______________________________________ Sport/Activity________________________
Assistant Coach/Sponsor Name___________________ Head Coach _________________________

Outstanding (4) Satisfactory (3) Improvement (2) Unsatisfactory (1) N/A (N/A)

Administrative Responsibilities:

____ Cooperates and works with HC regarding preseason paperwork (school and MSHSAA mandated).
____ Assists with team equipment and inventory.
____ Abides by MSHSAA guidelines and necessary certifications to be completed prior to first day of practice.
____ Assists in supervision of student athletes in practice and play areas.
____ Helps with proper planning of sport banquet at the conclusion of the season.
____ Assists the HC in duties and responsibilities requested by the coach.

Professional Qualities/Relationships:

____ Demonstrates a vested interest in the student-athlete and their well-being (both on and off the field/court).
____ Has knowledge of the activity/sport and able communicate effectively.
____ Demonstrates a level of respect to the Head coach, staff, and players.
____ Demonstrates professional sideline/bench etiquette and sportsmanship for players and opponents.
____ Able to properly teach fundamentals, while providing a positive and constructive environment.
____ Is an active and punctual coach attending all practice and games.
____ Praises student-athletes for positive performances and offers constructive criticism for improved performance.
____ Promotes all school activities and encourages student athletes to participate in a variety of sports/activities.
____ Assist the HC in off-season activities (conditioning/weight room).

General Overview Assessment: (Circle corresponding number)

Outstanding (4) Satisfactory (3) Improvement (2) Unsatisfactory (1)

**For any answer that needing improvement or unsatisfactory please provide additional information for each line item**

____________________________________________________________________________________
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Head Coach Additional Comments:

__________________________________________________________________________________________________
__________________________________________________________________________________________________
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Assistant Signature: ______________________ HC Signature: __________________ Date: ___________