

**OSU ATEP
PROSPECTIVE ATHLETIC TRAINING STUDENT
HOUR SHEET**

Name: _____ Rotation(Sport): _____
 ATC: _____ Semester: _____ Week: _____

Hours must be signed by a supervisor daily. Once you have completed all the observation requirements turn the completed (hours totaled and signed) form into your ACI (they will complete the evaluation and turn in to ATEP Program Director).

Date	Time In	Time Out	Daily Total	Activities for day	ACI Initials
What did I learn from these activities?					
What did I learn about the people I was assigned to?					
What did <u>I</u> do to learn something new during this time?					
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What did <u>I</u> do to learn something new during this time?					

TOTAL HOURS: _____

SUPERVISORS (ACI) SIGNATURE: _____ Date _____