

Suffolk University Athletics

National Collegiate Athletic Association Health Questionnaire–Returning Athletes

This form must be completed, signed and returned to the school each year before the student-athlete will be permitted to practice or compete.

Student _____ Email _____

Sport _____ Social Security No. _____

Major _____ YOG _____ DOB _____

The National Collegiate Athletic Association’s (NCAA) policies recommend that any student-athlete who intends to participate in intercollegiate athletic activities must have on file, in the school, a record of having passed a complete physical examination performed by a licensed physician.

Have you had a physical completed by a physician and on file with the Suffolk University Athletic Department?
 YES _____ NO _____ DATE _____

The following questions must be answered by the student-athlete: Circle One

1. Have you been hospitalized since the above physical exam? YES NO
 If yes, please explain.

2. Have you had a major injury since the above physical exam? YES NO
 If yes, please explain.

3. Have you been found to have only one good organ of usually paired organs? YES NO
 (Ex: one kidney, one good eye) If yes, please explain.

4. Do you require medication on a daily or episodic routine? YES NO
 (Ex: insulin daily or asthma medication with an attack)

Please list all medications you currently take.

5. Have you suffered any head injury/concussions at any time with the past 12 months? YES NO
 If yes, please explain.

6. Do you currently require a tetanus (lockjaw) booster (needed every 10 years)? YES NO

7. Do you know of or believe there is any health reason why you should not participate in intercollegiate athletics?
 If so, WHY?

The undersigned, herewith,

- A. Understands that he/she must refrain from practice or competition during medical treatment until he/she is discharged from treatment or given a written permit from the attending physician to resume participation.
- B. Certifies that the answers to the questions shown above are correct and true.
- C. Understands that his/her having passed the physical examination does not necessarily mean that he/she is physically qualified to engage in athletics, but only that the examiner did not find a medical reason to disqualify.
- D. A note from a physician may be needed to verify treatment of injuries sustained over the past year.

Signed: _____ Date _____