

## **KINESIOLOGY PRACTICUM DESCRIPTION**

**Practicum Position Title: Chiropractic Assistant**

**Agency/Company:** [Balanced Health & Sports Therapy](#)

**Location:** 1519 19 St NW, Calgary, AB

**Terms Available:** Fall or Winter

**Number of Positions:** 1

**Project Duties/Responsibilities:**

*Balanced Health and Sports Therapy* is a family and sports oriented clinic specializing in the multi-treatment approach for management and prevention of musculoskeletal injuries for the entire body. Their team includes Chiropractors, Physiotherapists and Massage Therapists that use Medical Acupuncture, dry needling, Traditional Chinese Acupuncture, Active Release Technique (ART), Graston instrument-assisted soft tissue mobilization and Class IV Low Level Laser Therapy by K-Laser.

**Under strict supervision**, the practicum student will:

- Spend approximately 5 hours obtaining on-line training for the K-Laser therapy. K-Laser Therapy is the use of specific wavelengths of light (red and near-infrared) to stimulate the body's natural ability to heal. The effects of laser energy include improved healing time, pain reduction, increased circulation and decreased swelling. Once trained, assist with the administration of K-Laser Therapy to clients.
- Observe and assist with kinesio-taping and cupping.
- Observe and assist with a biomechanical gait assessment and learn basic principles on brace and orthotic fittings.
- Learn the principles in the development of patient-centered exercise and stretching programs and demonstrate such exercises using proper form and correctional cues.
- Observe a complete chiropractic patient history and physical assessment, and develop a patient-centered treatment plan using an evidenced-based approach
- Observe a hands-on treatment of physical therapies such as Active Release Technique (ART), contemporary medical acupuncture, dry needling, Graston, soft tissue mobilizations, chiropractic manipulations.

**Required Student Qualifications:**

- Completion of KNES 259/260 (Human Anatomy & Physiology)

**Assets:**

- KNES 373 (Exercise Physiology)

**On-Site Supervisor:** Dr. Imran Moledina, BSc, DC, [drimranmoledina@gmail.com](mailto:drimranmoledina@gmail.com)

# Kinesiology Practicum Application

## Placement: [Balanced Health & Sports Therapy](#)

Students must have 60 units completed to qualify for a practicum, including 30 units of KNES  
Students may participate in up to three practicums, with no more than two at the same location

Submit together to  
[knespracticum@ucalgary.ca](mailto:knespracticum@ucalgary.ca):  
 Completed Practicum Application  
 Confidentiality Agreement

### INSTRUCTIONS

1. Contact the on-site supervisor to arrange an interview.
2. Bring a copy of this application with the completed student portion to your interview to be completed by the On-Site Supervisor.
3. Submit application and required documentation (if applicable) to [knespracticum@ucalgary.ca](mailto:knespracticum@ucalgary.ca); our office will email your @ucalgary address within 5 business days with next steps for you and your On-Site Supervisor.

### STUDENT PORTION – COMPLETE PRIOR TO INTERVIEW

<b>Practicum Term</b>		
<input type="checkbox"/> Fall _____ (year)	<input type="checkbox"/> Winter _____ (year)	<input type="checkbox"/> Spring _____ (year)
<b>Student Information</b>		
<b>Name:</b>	<b>UCID:</b>	
<b>Phone Number:</b>	<b>Email:</b>	@ucalgary.ca
<b>Student Practicum Expectations:</b> Why have you chosen this practicum placement? (1-2 sentences)		
<b>Code of Conduct</b>		
Students are responsible for compliance with the <a href="#">University of Calgary's Code of Conduct</a> .		
<input type="checkbox"/> Yes <input type="checkbox"/> No	I have read and understood the University of Calgary's Code of Conduct.	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a pre-existing relationship(s) with person(s) or group(s) associated with this practicum placement? If yes, please briefly explain the nature of the relationship:	
<b>I agree that:</b>		
<ul style="list-style-type: none"><li>• No salary or payment will be received based upon my participation in a Kinesiology practicum placement</li><li>• I will meet the expectations of the practicum placement for which I am applying</li><li>• I will be punctual throughout my practicum placement and will adequately notify the On-Site Supervisor about any absence(s).</li><li>• I will complete 60-72 hours within the dates of the term.</li></ul>		
<b>Start Date</b> (first day of lectures)	<b>End Date</b> (last day of lectures)	
_____	_____	
<input type="checkbox"/> I agree with the above-mentioned terms and conditions.		
<b>Student's Signature:</b>	<b>Date:</b>	

### ON-SITE SUPERVISOR PORTION

<b>Name:</b> Dr. Imran Moledina	<b>Organization:</b> Balanced Health & Sports Therapy
<b>Phone:</b>	<b>Email:</b> <a href="mailto:drimranmoledina@gmail.com">drimranmoledina@gmail.com</a>
<b>As the On-Site Supervisor, I agree that:</b>	
<ul style="list-style-type: none"><li>• No salary or compensation will be given to the practicum student</li><li>• I will provide sufficient hours, supervision, and guidance during this practicum placement</li><li>• I will complete a mid-point and final evaluation for the practicum student.</li></ul>	
<input type="checkbox"/> I agree with the above-mentioned terms and conditions.	
<b>On-Site Supervisor's Signature:</b>	<b>Date:</b>

## **CONFIDENTIALITY AGREEMENT**

Practicum students and the agency must complete the signed confidentiality agreement and submit it (along with the practicum application form) to [knespracticum@ucalgary.ca](mailto:knespracticum@ucalgary.ca).

THIS AGREEMENT is made as of the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

BETWEEN:

\_\_\_\_\_

(hereinafter called the "Agency")

AND:

\_\_\_\_\_

(hereinafter called the "Student")

**Whereas:**

It is the Student's legal and ethical responsibility to protect the privacy, confidentiality and security of all records, proprietary information and other confidential information relating to the Agency, including business, employment and medical information relating to patients, members, employees and health care providers. ("Confidential Information").

**And whereas:**

The Agency has adopted policies and procedures regarding Confidential Information including its policies and procedures for complying with the *Freedom of Information and Protection of Privacy Act* and the *Health Information Act* ("Policies and Procedures").

**In witness hereof, the parties agree as follows:**

1. The Agency agrees to disclose and the Student agrees to receive Confidential Information in furtherance of participating in his/her practicum with the Agency, as set out in the Practicum Agreement.
2. The Agency agrees to advise, instruct and guide the Student as to the Policies and Procedures.
3. Upon receipt of the information set out in paragraph 2 herein, the Student agrees to use his/her best efforts to comply with the Policies and Procedures and to protect the Confidential Information, or any part thereof, and prevent it from being disclosed to any person contrary to the Policies and Procedures.

IN WITNESS WHEREOF, the parties have duly executed this Agreement effective as of the day and year first written above.

**Agency**

**Student**

Signed: \_\_\_\_\_

Signed: \_\_\_\_\_

Print Name: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date \_\_\_\_\_

Date: \_\_\_\_\_