



### **Athletic Medical Certification**

The University of Wisconsin Colleges requires that all individuals provide written proof that they are physically qualified to participate in intercollegiate athletics.

I, Doctor \_\_\_\_\_ (Medical Doctor)  
certify that \_\_\_\_\_ (student-athlete) is  
physically qualified to participate in intercollegiate athletics at UW – Marinette for the  
20\_\_ - \_\_\_\_ academic year.

**Restrictions** (list below):

Physician's Signature

\_\_\_\_\_

Address

\_\_\_\_\_

Telephone

\_\_\_\_\_

Date

\_\_\_\_\_

**NOTE TO THE DOCTOR:** The University of Wisconsin assumes that you have recently examined this individual, and that this medical examination is the basis for your certification.

**Unless otherwise indicated,** this physical exam will allow the above listed athlete to participate in the intercollegiate athletic program at UW – Marinette for **two consecutive** academic years from the date of examination.

\*Athletes are required to have a physical prior to practicing with their respective team.