

# UNIVERSITY OF NOTRE DAME ATHLETICS



## ATHLETICS COMPLIANCE OFFICE COUNTABLE ATHLETICALLY RELATED ACTIVITIES (CARA) LOG

**SPORT** \_\_\_\_\_

**MONTH** \_\_\_\_\_

Day of Week	Date	Strength & Cond.	Daily Total
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Weekly Total of Countable Athletically Related Activities			

Day of Week	Date	Strength & Cond.	Daily Total
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Weekly Total of Countable Athletically Related Activities			

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Weekly Total of Countable Athletically Related Activities			

*Please note any exceptions or special circumstances involving individual or multiple student-athletes*

**Notes/Comments**

**I certify that the information on this form is accurate and that I have not exceeded the limits set forth in NCAA Bylaw 17.**

**SUBMITTING COACH**

**DATE**