



College of Natural Sciences  
Department of Kinesiology

Dear Interested Fitness Assessment Internship Student,

Our Fitness Assessment Program at California State University, San Bernardino is located in HP 126 laboratory. As a student you are required to complete at least 5 hours a week of fitness assessments over the 10-week quarter to fulfill your requirement for KINE 493 course. To be considered for this internship you must have taken at least KINE 481.

Throughout the quarter you would refine your testing skills and test over 80 individuals, which include: heart rate, blood pressure, skin folds, flexibility, grip strength, push-up test, and sub-maximal aerobic cycling test. During the 10-week period you will become more comfortable and skilled at administering fitness assessments, communicating information effectively, and understanding the importance of cardiovascular disease risk factors.

If you are interested in this internship, please prepare the following documents and information seen below and submit all materials at this [link](#).

- Contact info
- Schedule availability for quarter applying
- Answers to a few questions (see below)
- 2 References
- Cover letter and Resume

Please feel free to ask any questions and we look forward to your application.

Sincerely,

-----  
Nicole C. Dabbs, PhD

*Associate Professor*  
Co-Director of Fitness Assessment Program  
Department of Kinesiology  
California State University – San Bernardino  
5500 University Parkway, HP 210  
San Bernardino, CA 92407  
Office: (909) 537-7565  
Email: [ndabbs@csusb.edu](mailto:ndabbs@csusb.edu)

-----  
Jason Ng, PhD

*Assistant Professor*  
Co-Director of Fitness Assessment Program  
Department of Kinesiology  
California State University – San Bernardino  
5500 University Parkway, HP 209  
San Bernardino, CA 92407  
Office: (909) 537-5412  
Email: [Jason.ng@csusb.edu](mailto:Jason.ng@csusb.edu)

909.537.5349 • fax: 909.537.7085 • <http://kine.csusb.edu>

**5500 UNIVERSITY PARKWAY, SAN BERNARDINO, CA 92407-2393**



College of Natural Sciences  
Department of Kinesiology

**Fitness Assessment Program  
Kinesiology Department**

**Student Internship Application**  
Quarter: \_\_\_\_\_ Yr: \_\_\_\_\_

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

☐ Email: \_\_\_\_\_ ☐ Phone: \_\_\_\_\_ (☐ home or ☐ cell)

Student Status: ☐ Junior ☐ Senior Major & Advising Track: \_\_\_\_\_ Expected Graduation date: \_\_\_\_\_

Internship: ☐ KINE 493 (*Undergrad – 50 hours*) ☐ Other \_\_\_\_\_

CPR Certified: ☐ Yes ☐ No Expiration Date: \_\_\_\_\_ ID #: \_\_\_\_\_

Other Certifications: \_\_\_\_\_

**Coursework.** Check below courses you have completed (*indicate Quarter Completed and Grade*) or courses that will be in progress (*indicate In Progress*).

<input type="checkbox"/> KINE 210 _____	<input type="checkbox"/> KINE 370 _____
<input type="checkbox"/> KINE 270 _____	<input type="checkbox"/> KINE 410 _____
<input type="checkbox"/> KINE 305 _____	<input type="checkbox"/> KINE 480 _____
<input type="checkbox"/> KINE 310 _____	<input type="checkbox"/> KINE 481 _____
<input type="checkbox"/> KINE 325 _____	<input type="checkbox"/> KINE 486 _____
<input type="checkbox"/> Other _____	<input type="checkbox"/> KINE 483 _____

**Availability:** Please list all available times you would be available to attend during the Quarter you are applying  
(Interns must be able to attend a minimum of 5 hours/week and times must range from 8am-5pm).

<b>Monday:</b>	
<b>Tuesday:</b>	
<b>Wednesday:</b>	
<b>Thursday:</b>	
<b>Friday:</b>	

Please list any concerns with your schedule \_\_\_\_\_

**Please also complete the back page of this application.**  
909.337.5349 • fax: 909.337.7085 • <http://kine.csusb.edu>

**5500 UNIVERSITY PARKWAY, SAN BERNARDINO, CA 92407-2393**



College of Natural Sciences  
*Department of Kinesiology*

Please describe any work experience or other practical experience that has prepared you to work in the Fitness Assessment Program.

Please explain why you are interested in working in the Fitness Assessment Program.

List two references (at least one of whom must be a KINE faculty member):

Name	Department/Employer	Phone

**If you have any questions please contact**

**Dr. Nicole Dabbs at [ndabbs@csusb.edu](mailto:ndabbs@csusb.edu) and/or Dr. Jason Ng at [Jason.ng@csusb.edu](mailto:Jason.ng@csusb.edu)**

909.537.5349 • fax: 909.537.7085 • <http://kine.csusb.edu>

**5500 UNIVERSITY PARKWAY, SAN BERNARDINO, CA 92407-2393**