July 20, 2015

Dear new/returning JC Athlete:

Prior to participating on an athletic team for Jefferson College, athletes must provide the Athletic Department with current address, emergency contact, insurance, medical alert and health history information. To expedite this process Jefferson College uses an online data entry system to keep your electronic medical records (EMR’s) and personal health records (PHR’s).

To enter your information, visit www.swol123.net. The first time you visit the website you will need to click the “Join SportsWare” and follow the instructions below.

If you have already sent us your medical packet, you will still need to “Join SportsWare” and set up your login and password. You are not required to fill out any on line forms at this time.

### Joining SportsWareOnLine

<table>
<thead>
<tr>
<th>Instruction</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Go to <a href="http://www.swol123.net">www.swol123.net</a>.</td>
<td>![Example Image]</td>
</tr>
<tr>
<td>Click the <strong>Join SportsWare</strong> button. (on the middle right side of the screen)</td>
<td>![Example Image]</td>
</tr>
<tr>
<td>Enter our School ID:</td>
<td>![Example Image]</td>
</tr>
<tr>
<td>The school ID is <strong>JeffCo Athletics</strong></td>
<td>![Example Image]</td>
</tr>
<tr>
<td>Then click the <strong>Next</strong> button</td>
<td>![Example Image]</td>
</tr>
<tr>
<td>Enter your First Name, Last Name, Email address and Group (SportsWare College)</td>
<td>![Example Image]</td>
</tr>
<tr>
<td>click the <strong>Send</strong> button</td>
<td>![Example Image]</td>
</tr>
</tbody>
</table>
Your request to join SportsWare will then be sent to the Athletic Trainer for review.

*You will be approved within a 24 hour period. You do not get approved immediately.

Once your request is accepted you will receive an e-mail with the Subject “SportsWare request accepted”.

Open the e-mail and click the www.swol123.net link to continue to SportsWareOnLine.

Remember your login and password information for future use. This will be how to access your PHR’s for the entirety of your JeffCo student-athlete career.

## Setting Your Password

<table>
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<tbody>
<tr>
<td>Go to <a href="http://www.swol123.net">www.swol123.net</a></td>
<td><img src="image1.png" alt="Image" /></td>
</tr>
<tr>
<td>Enter your Email Address and click the Reset Password button.</td>
<td><img src="image2.png" alt="Image" /></td>
</tr>
<tr>
<td>You will receive and e-mail with the Subject “SportsWareOnLine Password Request”.</td>
<td><img src="image3.png" alt="Image" /></td>
</tr>
<tr>
<td>Open the e-mail and click on the link to reset your password. Enter your e-mail address, new password and click the Save button.</td>
<td><img src="image4.png" alt="Image" /></td>
</tr>
</tbody>
</table>

Thank you for your prompt attention to this matter. If you have any questions, please contact the athletic office at 636-481-3384 for assistance.

Sincerely,

Gregg Crain, ATC

**IMPORTANT: THE INSTRUCTIONS START ON THE NEXT PAGE:**
### Entering Your Information

<table>
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<td>Go to <a href="http://www.swol123.net">www.swol123.net</a></td>
<td><img src="image" alt="Go to www.swol123.net" /></td>
</tr>
</tbody>
</table>

Enter your Email Address and click the **Login** button.

To the right is an example of your Dashboard page.

At the top of the page is the Menu Bar.

**My Info:** Update your address, emergency contact and insurance information. *(Details on how to complete these sections can be found on pages 4-7)*

**Med History:** Complete the Medical History questionnaire **ENTIRELY!** *(Details on how to complete this section can be found on page 6)*

**Forms:** Complete required paperwork. Note: SportsWare will also display “You have ? forms to complete/download”.

![Dashboard page](image)
Dashboard Page:
- **Forms**
  - This section will tell you how many forms you have to complete
- **Status**
  - This section will tell you if your Athlete Information and Medical History are complete or incomplete
- **Notices & Handbooks**
  - This section contains all documents that you will need to read in order to complete your forms

My Info Tab (on the Menu Bar):
ALL LINES MARKED WITH A RED ASTERISK ARE REQUIRED TO BE COMPLETED.

- **General Tab:**
  - **General Section:**
    - ID = JeffCo V#
    - Class = Academic Year
    - Gender = Female or Male
    - Birth Date = Birth Date
  - **Sports/Group Section:**
    - Sport1 = Primary Sport
    - Sport2 = Secondary Sport – if playing more than one sport
    - Group = SportsWare College

- **Address Tab:**
  - **Primary Address Section** = Permanent Home Address
    *International Student-Athletes please provide us with your full mailing address in this section; State = N/A if not applicable; Zip Code = Postal Code
    Address = Street number and name, PO Box
    City = City/Town
    State = State
    Zip = Zip code
    Country = Country
    Phone = House phone # or N/A if you don’t have a landline
  - **Secondary Address Section** = school apartment address

**If you do not know your school address information you can give it to us as soon as you know it.**

*If your Secondary Address is the same as your Primary Address, type “Same as Primary” in the address line for secondary address.

If your Secondary Address is different than your Primary Address, complete the following items:
  - Address = Street number and name, PO Box
  - City = City/Town
  - State = State
  - Zip = Zip code
  - Country = Country
  - Cell = Student-Athlete’s US cell phone #
  - E-Mail Address = JeffCo E-Mail

- **Emergency Tab:**
  - **Emergency Contacts** = Two people you are allowing the Athletic Training Department to contact in case of an emergency. Both Primary and Secondary Contacts are REQUIRED!
Primary Emergency Contact Section:
*International Student-Athletes please provide us with his/her full mailing address in this section; State = N/A if not applicable; Zip Code = Postal Code

- First = First Name
- Last = Last Name
- Relationship = His/her relationship to you
- Address = Street number and name, PO Box
- City = City/Town
- State = State
- Zip = Zip code
- Country = Country

Emergency contact must have at least one phone number to be reached at.

- Home Phone = House phone # or N/A if he/she does not have a landline
- Work Phone = Work phone # with extension or N/A if he/she does not have one
- Cell Phone = Cell Phone # or N/A if he/she does not have one
- E-mail = E-mail. If they do not have an email, type xxx@xxx.xxx

Secondary Emergency Contact Section:
*International Student-Athletes please provide us with his/her full mailing address in this section; State = N/A if not applicable; Zip Code = Postal Code

- First = First Name
- Last = Last Name
- Relationship = His/her relationship to you
- Address = Street number and name, PO Box
- City = City/Town
- State = State
- Zip = Zip code
- Country = Country

Emergency contact must have at least one phone number to be reached at.

- Home Phone = House phone # or N/A if he/she does not have a landline
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- Cell Phone = Cell Phone # or N/A if he/she does not have one
- E-mail = E-mail. If they do not have an email, type xxx@xxx.xxx

Insurance Tab: If you do not have insurance or not covered under anyone else’s plan, put N/A for the Company.

Primary Insurance Company Section:

- Company = Health Insurance Company Name
- Address = Health Insurance Company Claims Address (can be found on back of health insurance card)
- Address = Street number and name, PO Box
- City = City/Town
- State = State
- Zip = Zip code
- Phone = Health Insurance Company Customer Service Phone Number (can be found on the back of health insurance card)
• **Policy Holder Section:**
  - Name = Policyholder’s first and last name
  - Birth Date = Policyholder’s Birth Date
  - ID = Member ID # (found on your Insurance card if applicable)

• **Policy Information Section:**
  *Any information not known below, please contact your insurance provider to obtain the information.*
  - Policy = Policy #
  - Plan = Group #/Plan #
  - Type = Type of Insurance (PPO, HMO, HSA, POS, Medicaid, Open Access)
  - See First = Leave blank
  - Phone = Policyholder’s best contact phone #

• **Insurance Card Section:**
  - Upload Insurance Card = You must scan a copy of the front AND back of your health insurance card and upload that copy in this section. See Appendix A to do this with your phone.

• **Medical Tab:**
  • **Alerts Section:**
    - Alerts = Any medical condition that the Athletic Training Department should know (Ex: allergies, asthma, sickle cell, diseases, etc.). If your condition is not on the drop down menu, mark “Other”. If you do not have any conditions to report, you must mark N/A in the first Alert box.
  • **Immunization Section:**
    - Immunizations = Leave blank
  • **Drugs Taken Section:**
    - Medication = Leave blank
    - Notes: Use this section to type the specific medications/supplements/vitamins you are currently taking. *If you use an inhaler, specify the type of inhaler you use in this section. If you are not on any medications/supplements/vitamins you must mark N/A.

• **Doctor Section:**
  - Doctor = Primary Physician first and last name
  - Phone = Primary Physician’s office phone #
  - If you do not have a primary physician, you must mark N/A in both sections.

• **Medical History Tab (on the Menu Bar):**
  • **General Section:**
    - Date = Date you are submitting this form
    - Evaluator = Leave Blank
    - Sport = Primary Sport
  • **In the items that follow the General Section:**
    - • If you answer YES to any questions, you MUST provide an explanation in the comment section. Please state when the injury/condition occurred, diagnosis, and the condition/injury sustained (Ex: 3/10, UCL sprain).
    - • If you are a male, you do not need to complete the Female Section at the end of the Medical History. You can leave those questions blank or mark “No”.
- Forms Tab (on the Menu Bar):
  - All forms will be verified using electronic signatures (except your physical, see below)
    - The Student-Athlete’s electronic signature is needed on all forms EXCEPT the Authorization of Information Form. Your parent/guardian and your electronic signature is needed for this form.

**Physical** - A blank physical form can be found on the dashboard page under NOTICES AND HANDBOOKS.
You will need to print the physical form and take with you for your physical. Once completed, sign it and upload it to forms. To upload, scan and save your physical then click the ADD button on the top left on the Forms tab. Upload your saved file and title it “physical”. If you use another type of physical form, scan and save it to your computer. Upload your saved file and title it “physical”.

- How to Open a form & Electronically Sign and Submit it:
  - Select a form by clicking “Select” to the left of the form.
  - Once it is highlighted, click “Open” on the left of the screen.
  - Once the form is opened, read through the entire document and COMPLETE ALL SHADED BOXES throughout the form.
  - Once you have read and completed all boxes, select the “Save & Submit” button at the top of the screen. Once you electronically sign the document you will not be allowed to go back in and make any changes to the document. If you do not want to submit the form but save what you have done, click the “Save” button and you can come back to the document later to make changes to it.
  - This will prompt the electronic signature box to appear as shown in the picture below.

![Image of a form being opened and signed electronically]
• Read the statement and complete the boxes with First Name, Middle Initial (MI), Last Name, and check the box for “I acknowledge that I am electronically signing this request.”
• Then click “Submit” button, a box will be prompted that states, “You will not be able to make any changes after this”. MAKE SURE THE FORM YOU ARE SUBMITTING IS ACCURATE AND COMPLETE BEFORE CLICKING OK and click “Ok” button.
• Repeat these steps for all of the forms in the Forms Section

Thank you in advance for completing this process. If you have any questions, please contact the Athletic Training Department for assistance:
Gregg Crain 636-481-3393
Debbie Maples 636-481-3394
Shannon Steed 636-481-3384

Sincerely,

Jefferson College Athletic Department
Appendix A

How to upload your insurance card from a smart phone

Step 1: Take a picture of the front of your insurance card (make sure all numbers are legible)
Step 2: Take a picture of the back of your insurance card (make sure all numbers are legible)
Step 3: Email the pictures to your email from your phone.
Step 4: Get on a computer and open the email with the pictures.
Step 5: Save the pictures to your computer or flash drive.
Step 6: Log onto your SportsWare (www.swol123.net) profile and click ‘My Info’.
Step 7: Click on the insurance tab at the top of the page.
Step 8: At the bottom of the insurance tab, in the upload section, click the ‘Choose file’ button and find the saved picture of the front of your insurance card. Select the file and click ‘Open’.
Step 9: Click the ‘Add’ button on the SportsWare site for the Front Uploaded section (meaning upload the front of your insurance card).
Step 10: Repeat steps 8 & 9 for the back of your insurance card. Make sure to upload the back of your insurance card to the Back Uploaded section.
Step 11: Once file has been added to the insurance tab, click ‘save’ at the top of the page and your insurance card will be uploaded.
Step 12: To ensure that the card is uploaded, go back into the ‘My Info’ section and click on the insurance tab. At the bottom of the page, in the upload section, click ‘Open’. This should open the documents that you just uploaded of your insurance card.