You have the ability to copy both Athlete and Staff forms from the ATS Library. You can do this from the Form Name Maintenance Area (for both Athlete and Staff forms).



At the bottom of the Form Maintenance page you will see a "copy from library" button. Click this and the dropdown list of forms available will appear. Choose the form you want and click "Process " to copy the form to your database. Click done when you have copying over forms.

Region Name   Team Name   Organization   Gender   Ath Year   Outcome Form     East PIAA (1) Personal and Elter   PIAA   0   No   No   0   0   0   0     North 50 State AthleteParent PP   50 st   0   No   No   0   0   0   0     18 Concussion Symptom Diary   csi   0   Yes   No   0   0   0   0     2013-14 Sickle Cell   2013-   0   Yes   No   0   0   0   0   0     45 Treatment Authorization Agree   TAA   0   No   No   0	eam Name		Organ	nization							
East PIAA (1) Personal and Eller PIAA O No No O O O O O O O O O O O O O O O O								Ath Yea	ar	Outcon	ne Form
East PIAA (1) Personal and Exer   PIAA   Ø   No   No   Ø   Ø   O <td></td>											
North 50 State AthleteParent PP 50 st   0   No   No   0   0     18 Concussion Symptom Diary   cs   0   Yes   No   0   0     2013-14 Sickle Cell   2013-   0   Yes   No   0   0   0     2013-14 Sickle Cell   2013-   0   Yes   No   0   10   0     24 HIPAA Release   HIPAA   0   No   No   0   0   0     45 Treatment Authorization Agree   TAA   0   No   0   0   0   0     55 Eating Attitudes Test (MH)   MHEating   0   No   0   0   0   0     Conccussion Self-Eval   Concu   0   Yes   No   30   30	IAA		0	No	No			0			
North 50 State AthleteParent PP     50 st     Ø     No     Ø								0			]
18 Concussion Symptom Diary   cs   0   Yes   No   0   0     2013-14 Sickle Cell   2013-   0   Yes   No   0   0   0     2013-14 Sickle Cell   2013-   0   Yes   No   0   0   0     24 HIPAA Release   HIPAA   0   No   No   0   0   0     45 Treatment Authorization Agree   TAA   0   No   No   0   0   0     55 Eating Attitudes Test (MH)   MHEating   0   No   0   0   0   0     Concussion Self-Eval   Concu   0   Yes   No   30   30	0 st		0	No	No			0			
18 Concussion Symptom Diary   cs   0   Yes   No   0   0     2013-14 Sickle Cell   2013-   0   Yes   No   0   10     24 HIPAA Release   HIPAA   0   No   0   0   0     45 Treatment Authorization Agree   TAA   0   No   No   0   0     55 Eating Attitudes Test (MH)   MHEating   0   No   0   0   0     Concussion Self-Eval   Concu   0   Yes   No   30   30								0			]
2013-14 Sickle Cell   2013-   0   Yes   No   ID   ID     24 HIPAA Release   HIPAA   0   No   ID   ID   ID     45 Treatment Authorization Agree   TAA   0   No   No   ID   ID     65 Eating Attitudes Test (MH)   MHEating   0   No   No   ID   ID     Concussion Self-Eval   Concu   0   Yes   No   ID   ID	st		0	Yes	No			0			
2013-14 Sickle Cell   2013-   0   Yes   No   10     24 HIPAA Release   HIPAA   0   No   0   0     45 Treatment Authorization Agree   TAA   0   No   0   0     65 Eating Attitudes Test (MH)   MHEating   0   No   0   0   0     Concussion Self-Eval   Concu   0   Yes   No   V   30								0		L	
24 HIPAA Release   HIPAA   0   No   0   0     45 Treatment Authorization Agree   TAA   0   No   0   0     65 Eating Attitudes Test (MH)   MHEating   0   No   0   0   0     Concuusion Self-Eval   Concu   0   Yea   No   V   30	013-		0	Yes	No			10			-
45 Treatment Authorization Agree   TAA   0   0   0   0     65 Eating Attitudes Test (MH)   MHEating   0   No   0   0   0     65 Eating Attitudes Test (MH)   MHEating   0   No   0   0   0     Concussion Self-Eval   Concu   0   Yac   No   V   30	IIPAA		0	No	No			0		L	
45 Treatment Authorization Agree TAA 0 No No 0 0 0 0 65 Eating Attitudes Test (MH) MHEating 0 No No 0 0 0 Concussion Self-Eval Concu 0 Yaa No 0 30	Performance of							0		Γ	7
65 Eating Attitudes Test (MH)     MHEating     0     0     0       Concussion Self-Eval     Concu     0     10     0	AA		0	No	No			0			
65 Eating Attitudes Test (MH) MHEating 0 No No □ 0 0 Concussion Self-Eval Concu 2 <u>0 Yac</u> No □ <u>30</u>								0			]
Concussion Self-Eval     O     □       0     Yaa     No     >     30	1HEating		0	No	No			0			
Concussion Self-Eval Concu 🗹 0 Yee No 🔽 30								0			
	oncu		0	Yee	Ho			30			
	iary	1 50 S	itale PP	E History	Form						-
Concussion Symptom Diary 123 diary 1 50 State PPE History Form										_	
		Dist Control of the second sec	Dist Constraints of the second	Dist 2 0 A 0 IFAA 2 0 HEating 0 hEating 0 oncu 0 Chooks the 1 1 50 State PP	Dist Image: Chook > the form to c   13 Image: Chook > the form to c   14 Image: Chook > the form to c   15 State PPE History	Dist Image: Choose the form to copy & click   10 No   No No	Dist     Image: Constraint of the second se	Dist   Ø   No   No   Image: Constraint of the state	0 st   0   No   No   0   0     0 st   0   No   No   0   0     0 ves   No   0   0   0     013   0   Yes   No   0   0     013   0   Yes   No   0   0     013   0   Yes   No   0   0     013   0   No   No   0   0     013   0   No   No   0   0     014   0   No   No   0   0     044   0   No   No   0   0     044   0   No   0   0   0     044   0   No   No   0   0     05   0   No   0   0   0     00   10   No   0   0   0     00   10   10   0   0   0     00   10   10   10   0   0     00   10	0 st   0   No   No   0   0     0 st   0   No   0   0   0     0 st   0   Yes   No   0   0     013   0   Yes   No   0   0     013   0   Yes   No   0   0     1874   0   No   No   0   0     AA   0   No   No   0   0     HEating   0   No   0   0   0     oncu   0   Yes   No   0   0     ary   150 State PPE History Form   50   10   10	0 st   0 No   No   0   0     0 Ves   No   0   0   0     013   0   Yes   No   0   0     013   0   No   0   0   0     0   0   0   0   0   0   0     0   0   0   0   0   0   0   0     0   10   10   0   0   0   0   0   0     0   10   10   30   0

If you wish to view either the Athlete or Staff form before you copy it over to your database, click the blue information icon next to the Copy from library button and follow the instructions that appear.

