## **Demographics** Please fill in the information below with as much detail as possible. 1. Participant information: First Name: Last Name: Todays Date: Preferred email Address: Has there been any change in your competitive level since the first data collection session? (For example, getting selected for county, national or international team for the first time). Has there been a change in your training since the first data collection session (Yes/No)? Has your training frequency increased, decreased or remained the same? Has your training volume: increased, decreased or remained the same? Has your training intensity: increased, decreased or remained the same? Has the type of your training changed, or remained the same (for example, change in training from strength based to speed based training)? Have you completed any training session today (Yes/No)?

Have you completed any	
training session within the	
last 24 hours (Yes/No)? If	
yes, give details on	
duration and intensity.	
Have you performed any	
balance training since the	
last data collection	
session?	
l	
Have you consumed any	
alcohol within the <i>last 24</i>	
hours (Yes/No)? If yes,	
how much	
(approximately).	
'	
Are you currently taking	
any medication (Yes/No)?	
If yes, please list.	
Have you ingested any	
caffeine within the last 2	
hours? Yes/No?	
neare: respire:	
*IMPORTANT* If you were	
injured at the first data	
collection, but have since	
recovered - how many	
days did the injury cause	
you to miss or modify your	
usual training in total?	
l	
*IMPORTANT* Have you	
still got an injury which you	
sustained before the first	
data collection session	
(Yes/No?) If Yes, specify	
side (left/right) loaction	
and number of days	
missed.	
'	

## Injury reporting

Please provide detail about any *sports related injuries* that caused you to *miss or modify your usual training* since the first data collection session. Try and provide as much information as possible.

If you have had *more than one* sports related injury causing you to miss or modify your training, please use the additional answer boxes to provide information on all the injuries you may have sustained.

Only complete for NEW injuries sustained since the last data collection.

2. Injury 1	
Injured site (e.g. hamstring)	
Injured side (e.g. left, right or both sides)	
Type of injury (e.g. muscle strain)	
Approximate date of the injury occurence?	
Approximately how many days did the injury cause you to miss/modify your usual training routine?	
How did you sustain the injury (i.e. what activity were you doing at the time of the injury)?	
Was the injury acute or overuse in nature (i.e. did the injury occur suddenly, or did it happen gradually	
over a period of days)?	
Was the injury contact or non-contact (i.e. did contact with another player / object lead to the injury or was there no external contact)?	
Are you still currently injured (Yes / No)?	

0 1				
3. Injury 2				
Injured site (	e.g.			
hamstring)				
3,				
Injured side (	(e.g. left, right			
or both sides				
	<i>'</i>			
Type of injury	y (e.g. muscle			
strain)				
,				
Approximate	date of the			
injury occure				
<b>J</b> . <b>J</b>				
Approximate	ly how many			
days did the				
you to miss/r				
usual training				
น่วนผา เกลเกเกุ	g routine:			
How did you	sustain the			
injury (i.e. wh				
	ing at the time			
of the injury)	?			
Maa tha iniu	m, couto or			
Was the inju				
overuse in na				
the injury occ				
	en gradually			
over a period	d of days)?			
Was the inju	ry contact or			
non-contact	(i.e. did			
contact with	another player			
	to the injury or			
was there no				
contact)?	- Criterion			
contact):				
Are you still o	currently			
injured (Yes				
ilijaica (1637				

A lairma Q	
4. Injury 3	
Injured site (e.g.	1
hamstring)	
J.	
Injured side (e.g. left, right	1
or both sides)	
Type of injury (e.g. muscle	1
strain)	
,	
Approximate date of the	1
injury occurence?	
Approximately how many	
days did the injury cause	
you to miss/modify your	
usual training routine?	
dada talining routile:	
How did you sustain the	
injury (i.e. what activity	
were you doing at the time	
of the injury)?	
Was the injury acute or	
overuse in nature (i.e. did	
the injury occur suddenly,	
or did it happen gradually	1
over a period of days)?	
Was the injury contact or	
non-contact (i.e. did	
contact with another player	
/ object lead to the injury or	
was there no external	
contact)?	
Are you still currently	1
injured (Yes / No)?	
mjaroa (1007110).	

## Life Event Survey

Instructions: Listed below are 69 events that sometimes occur in the lives of college athletes. These events often produce change within an individual's life that require some adjustment by the individual. For each event that you have experienced <u>since the last data collection session</u>, indicate what kind of effect it had on your life when the event occurred.

A rating of -4 would indicate that the event had an extremely negative effect on you.

A rating of +4 would indicate that the event had an extremely positive effect on you.

For those events that have happened more than once, indicate the average effect across all occurrences. If you have not experienced an event since the last data collection, leave that item blank. The events are listed in no particular order, and there are no right or wrong answers. Please respond to each event honestly as applies to you.

If you have NOT experienced an event listed below (e.g., Marriage), leave that item blank.

ONLY respond to items you have experienced since the last data collection session.

Please also provide the approximate date when each event started, and the number of days the event lasted (if applicable) in the box below the questions.

5. P1

	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extremely Positive +4
1. Marriage								
Event start date and num	ber of days o	f event occur	rence					
Death of mate (boyfriend, girlfriend, spouse, significant other)								
Event start date and num	ber of days o	f event occur	rence					

	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extremely Positive +4
3. Major change in sleeping habits (increase or decrease in amount of sleep)								
Event start date and num	ber of days o	f event occui	rence					
Death of a close family member(s) - Specify below:								
Event start date and num	ber of days o	f event occui	rrence					
4. Father								
Event start date and num	ber of days o	f event occui	rence					
5. Mother								
Event start date and num	ber of days o	f event occui	rence					
6. Brother								
Event start date and num	ber of days o	f event occui	rence					
7. Sister								
Event start date and num	ber of days o	r event occui	rence					
8. Grandfather								
Event start date and num	per of days o	r event occui	rence					
9. Grandmother								
Event start date and num	ber of days o	f event occui	rence					

end(s)  vent start date and number of days of event occurrence  . Outstanding resonal achievement  vent start date and number of days of event occurrence  . Male: mate pregnant		Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extreme Positive +4
rent start date and number of days of event occurrence  Outstanding resonal achievement  rent start date and number of days of event occurrence  A Male: mate pregnant	Event start date and num	ber of days o	f event occu	rrence					
rent start date and number of days of event occurrence  Outstanding resonal achievement  rent start date and number of days of event occurrence  A Male: mate pregnant									
. Outstanding resonal achievement rent start date and number of days of event occurrence  . Male: mate pregnant rent start date and number of days of event occurrence  . Female: becoming egnant regnant regn	11. Death of close friend(s)								
rent start date and number of days of event occurrence  Male: mate pregnant	Event start date and num	ber of days o	f event occu	rrence					
Male: mate pregnant	12. Outstanding personal achievement								
rent start date and number of days of event occurrence  . Female: becoming egnant	Event start date and num	ber of days o	f event occu	rrence					
rent start date and number of days of event occurrence  . Female: becoming egnant									
. Female: becoming egnant	13. Male: mate pregnant								
egnant	Event start date and num	ber of days o	f event occu	rrence					
egnant									
	14. Female: becoming								
rent start date and number of days of event occurrence									
	pregnant						Ü		
		ber of days o	f event occu	rrence					
		nber of days o	f event occu	rrence					
		ober of days o	f event occu	rrence					
		ober of days o	f event occur	rrence					
		ober of days o	f event occur	rrence					
		ober of days o	f event occur	rrence					
		ber of days o	f event occur	rrence					
		iber of days o	f event occur	rrence					
		aber of days o	f event occur	rrence					
		nber of days o	f event occur	rrence					
		iber of days o	f event occur	rrence					
		aber of days o	f event occur	rrence					
		nber of days o	f event occur	rrence					
		nber of days o	f event occur	rrence					
		aber of days o	f event occur	rrence					
		nber of days o	f event occur	rrence					
		nber of days o	f event occur	rrence					
		nber of days o	f event occur	rrence					

Event Survey								
5. P2	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extremely Positive +4
15. Sexual difficulties								
Event start date and	number of o	days of eve	nt occurrenc	e				
16. Being fired from job								
Event start date and	number of o	days of eve	nt occurrenc	е				
17. Being apart from mate (boy/girlfriend, spouse, etc) due to sport  Event start date and		days of eve	ent occurrence	e	0		0	
Serious injury or illness to close family member(s) - Specify below:								
Event start date and	number of o	days of eve	ent occurrenc	e				
18. Father								
Event start date and	number of o	days of eve	nt occurrenc	e				
19. Mother								
Event start date and	number of o	days of eve	ent occurrenc	e				
20. Brother								
Event start date and	number of (	days of eve	nt occurrenc	е				

	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extremely Positive +4
21. Sister								
Event start date and	d number of	days of eve	nt occurrenc	e		_		
22. Grandfather Event start date and	d number of	days of eve	ent occurrence	ee.				
23. Grandmother								
Event start date and	d number of	days of eve	nt occurrenc	e				
25. Other								
Event start date and	d number of	days of eve	nt occurrenc	e				
26. Major change in the number (more/less) of arguments with mate	$\bigcirc$							
Event start date and	d number of	days of eve	nt occurrenc	e		_		
27. Major personal injury or illness								
Event start date and	d number of	days of eve	nt occurrenc	e				
28. Major change in the frequency (increased or decreased) of social activities due to participation in sport			$\bigcirc$					
Event start date and	d number of	days of eve	nt occurrenc	e		_		
29. Serious injury or illness to close friend								

	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extremely Positive +4
ent start date and	number of c	lays of eve	nt occurrenc	e				

Event Survey								
'. P3	Extremely		Moderately	Somewhat	Somewhat	Moderately		Extremely
	Negative -4	Negative -3	Negative -2	Negative -1	Positive +1	Positive +2	Positive +3	Positive +4
30. Breaking up with mate (boy/girlfriend, etc)								
Event start date and num	ber of days o	f event occur	rence					
31. Beginning a new university experience (beginning university, transferring university								
etc)  Event start date and num	ber of davs o	f event occur	rence					
32. Engagement								
Event start date and num	ber of days o	f event occur	rence					
33.Academic probation/ineligibility								
Event start date and num	ber of days o	f event occur	rence					
34. Being dismissed from halls or other residence								
Event start date and num	ber of days o	f event occur	rence		_			
35. Failing an important exam								
Event start date and num	ber of days o	f event occur	rence					
36. Major change in relationship with coach (better or worse)								

		-3	-2	-1	+1	+2	+3	+4
Event start date and num	ber of days o	f event occu						
37. Failing a course  Event start date and num	ber of days o	f event occu	rrence					
38. Major change in the length and/or conditions of practice/training (better or worse)			0					
Event start date and num	ber of days o	f event occu	rrence					
39. Financial problems concerning school			$\bigcirc$					
Event start date and num	ber of days o	f event occu	rrence					
40. Major change in relationship with family member(s) (better or worse)		0	0		0			
Event start date and num	ber of days o	f event occu	rrence					
41. Conflict with roommate			$\bigcirc$					
Event start date and num	ber of days o	f event occu	rrence					
42. Male: mate having an abortion								
Event start date and num	ber of days o	f event occu	rrence					
43. Female: having an abortion			0					
Event start date and num	ber of days o	f event occu	rrence					

	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extrem Positiv +4
44. Major change in the amount (more or less) of academic activity (home work, class time, etc)		$\circ$	0		0			
Event start date and num	ber of days o	f event occur	rrence					

Event Survey								
. P4	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extreme Positiv +4
45. Pressure to gain/lose weight-due to participation in sport	-4							
Event start date and num	nber of days o	of event occu	rrence					
46. Discrimination from teammates/coaches								
Event start date and num	nber of days o	of event occu	rrence					
47. Major change in relationship(s) with team-mate(s) (better /worse)				0				
Event start date and num	nber of days o	f event occu	rrence					
48. Suspended from team for non-academic reasons			0					
Event start date and num	nber of days o	of event occu	rrence					
49. Trouble with academic counsellor			$\circ$					
Event start date and num	nber of days o	of event occu	rrence					
50. Major change in use of alcohol/drugs (increased or decreased)	$\circ$	$\bigcirc$	$\bigcirc$	$\circ$				
Event start date and num	nber of days o	f event occu	rrence					
51. Beginning sexual activity								

	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extremely Positive +4
Event start date and num	ber of days o	f event occu	rrence					
52. Major change in relationship(s) with friend(s) (better or worse)								
Event start date and num	ber of days o	f event occu	rrence					
53. Recovery from illness/injury/operation			0					
Event start date and num	ber of days o	f event occu	rrence					
54. Major change in level of athletic performance in actual competition (better or worse)	0		0	0		0		
Event start date and num	ber of days o	f event occu	rrence					
55. Divorce or separation of your parents								
Event start date and num	ber of days o	f event occu	rrence					
56. Major change in level of responsibility on team (increased/decreased)								
Event start date and num	ber of days o	f event occu	rrence					
57. Receiving an athletic scholarship	$\circ$		0					
Event start date and num	ber of days o	f event occu	rrence					
58. Not attaining personal goals in sport								

	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extremely Positive +4
Event start date and nun	nber of days o	f event occu	rence					
59. Major change in playing status on team								
Event start date and nun	nber of days o	f event occu	rence					

Event Survey								
). P5	Extremely		Moderately	Somewhat	Somewhat	Moderately		Extrer
	Negative -4	Negative -3	Negative -2	Negative -1	Positive +1	Positive +2	Positive +3	Posit
60. Injury to team-mates								
Event start date and num	ber of days o	f event occur	rence					
61. Being absent from university (classes) because of participation in sport								
Event start date and num	ber of days o	f event occur	rrence					
62. Troubles with athletic association and/or athletic director								
Event start date and num	ber of days o	f event occur	rence					
63. Difficulties with trainer/physician								
Event start date and num	ber of days o	f event occur	rence					
64. Major change in playing time (playing more or less) – due to injury		0	0					
Event start date and num	ber of days o	f event occur	rence					
65. Major errors/mistakes in actual competition								
Event start date and num	ber of days o	f event occur	rrence					
66. Losing your athletic								

	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extrer Posit +4
Event start date and num	nber of days o	f event occu	rrence					
67. No recognition/praise of accomplishments from coaching staff		$\circ$	$\circ$					
Event start date and num	nber of days o	f event occu	rrence					
68. Pressure from family to perform well			0					
Event start date and num	nber of days o	f event occu	rrence					
69. Loss of confidence due to injury			$\bigcirc$					
Event start date and num	nber of days o	f event occu	rrence					
70. Unable to find a job								
Event start date and nun	nber of days o	f event occu	rrence					
71. Change in coaching staff								
Event start date and num	nber of days o	f event occu	rrence					
72. Female: menstrual period/PMS								
Event start date and num	nber of days o	f event occu	rrence					
73. Major change in level of academic performance (doing better or worse)	$\circ$	$\bigcirc$		$\circ$		$\bigcirc$		
Event start date and num	her of days o	f event occu	rrence					

	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extrem Positiv +4
74. Making career decisions (applying for Masters course, interviewing for jobs, etc)		0	0		0		$\circ$	
Event start date and nun	nber of days o	f event occu	rrence					

Event Survey								
LO. P6	Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extremely Positive +4
75. Being cut/dropped from the team								
Event start date and nur	mber of days o	f event occur	ance					
76. Continual poor performance of team	$\bigcirc$					$\bigcirc$		
Event start date and nur	mber of days o	f event occur	ance					
77. Change in graduation schedule								
Event start date and nur	mber of days o	f event occur	ance					
78. Major change in family finances (increased or decreased)						$\bigcirc$		
Event start date and nur	mber of days o	f event occur	ance					
79. Major change in attitude toward sport (like/enjoy more or less)			0	0				
Event start date and nur	mber of days o	f event occur	ance					
80. Victim of harassment/abuse (sexual, emotional, physical)	0	$\bigcirc$	0			$\bigcirc$		$\bigcirc$
Event start date and nur	mber of days o	f event occur	ance					
81. Victim of personal attack (rape, robbery, assault, etc)	0							

		Extremely Negative -4	Negative -3	Moderately Negative -2	Somewhat Negative -1	Somewhat Positive +1	Moderately Positive +2	Positive +3	Extrer Posi
Event start	date and num	ber of days of	event occura	ance					
egative m		were not in	cluded in tl	o you in the he question	naire. If th	-	=	-	
	Negative -4	Negative -3	Negative -2	Negati -1		Positive +1	Positive +2	Positive +3	Posit +4
82. Other A									C
Other (plea	se specify). In	clude start da	te and numbe	er of days of ev	vent occurre	ence			
83. Other B									
	ioc opcony). III	ciude start da	te and number	er of days of e	vent occurre	nce			
		ciude siari da	te and numbe	er of days of ev	vent occurre	ence	0	0	C
С		0	0	er of days of ever		0			
С		0	0			0			C
C Other (plea 85. Other		0	0			0			C
85. Other	ase specify). In	clude start da	te and number		vent occurre	ence			C
C Other (plea 85. Other D	ase specify). In	clude start da	te and number	er of days of ev	vent occurre	ence			C
C Other (plea 85. Other D	ase specify). In	clude start da	te and number	er of days of ev	vent occurre	ence			C
C Other (please) 85. Other D Other (please) 86. Other E	ase specify). In	clude start da	te and number	er of days of ev	vent occurre	ence			

Personality Questionna	ire								
Below are a list of stater  Please rate how accurate  Select only one respons	ely each statement								
Do not spend too much time thinking about the questions and please answer honestly. Your answers will remain confidential.									
Make sure to answer all  * 12. P1	of the questions.								
	Not at all	Slightly	Moderately	Highly					
I feel sad when I suffer even minor setbacks.									
I am often preoccupied with unpleasant thoughts.	$\bigcirc$		$\bigcirc$						
Sometimes even little things in life can give me great pleasure.									
I am especially sensitive to reward.									
I put in a big effort to accomplish important goals in my life.									
I sometimes feel 'blue' for no good reason.									
When feeling 'down', I tend to stay away from people.									
I often experience a surge of pleasure running through my body.									
I would be frozen to the spot by the sight of a snake or spider.									
I have often spent a lot of time on my own to "get away from it all".									

	Not at all	Slightly	Moderately	Highly
I am a very active person.				
I'm motivated to be successful in my personal life.				
I am always 'on the go'.				
I regularly try new activities just to see if I enjoy them.				
I get carried away by new projects.				
Good news makes me feel over-joyed.	$\bigcirc$			$\bigcirc$
The thought of mistakes in my work worries me.				
When nervous, I sometimes find my thoughts are interrupted.				
I would run quickly if fire alarms in a shopping mall started ringing.		$\circ$		
I often overcome hurdles to achieve my ambitions.				

Per	sonality Questionnaire	9			
* <u>`</u>	13. P2	Not at all	Slightly	Moderately	Highly
	I often feel depressed.				
	I think I should 'stop and think' more instead of jumping into things too quickly.	$\bigcirc$			
	I often feel that I am on an emotional 'high'.				
	I love winning competitions.				
	I get a special thrill when I am praised for something I've done well.				
	I take a great deal of interest in hobbies.	$\bigcirc$	$\bigcirc$		
	I sometimes cannot stop myself talking when I know I should keep my mouth closed.				
	I often do risky things without thinking of the consequences.	$\bigcirc$			
	My mind is sometimes dominated by thoughts of the bad things I've done.				
	I get very excited when I get what I want.	$\bigcirc$			$\bigcirc$
	I feel driven to succeed in my chosen career.				
	I'm always finding new and interesting things to do.	$\bigcirc$			
	I'm always weighing-up the risk of bad things happening in my life.	$\circ$			
	People are often telling me not to worry.	$\bigcirc$			

	Not at all	Slightly	Moderately	Highly
I am very open to new experiences in life.				
I always celebrate when I accomplish something important.				
I find myself reacting strongly to pleasurable things in life.				
I find myself doing things on the spur of the moment.				
I would instantly freeze if I opened the door to find a stranger in the house.				
I'm always buying things on impulse.			$\bigcirc$	
I am very persistent in achieving my goals.			$\circ$	
When trying to make a decision, I find myself constantly chewing it over.				
often worry about etting down other people.				
would go on a holiday at the last minute.	$\bigcirc$		$\bigcirc$	
I would run fast if I knew someone was following me late at night.				
I would leave the park if I saw a group of dogs running around barking at people.				
I worry a lot.				
I would freeze if I was on a turbulent aircraft.	$\bigcirc$			

Personality Questionnaire

	Not at all	Slightly	Moderately	Highly
My behavior is easily interrupted.				
It's difficult to get some things out of my mind.				
I think the best nights out are unplanned.				
There are some things that I simply cannot go near.				
If I see something I want, I act straight away.				
I think it is necessary to make plans in order to get what you want in life.				
When nervous, I find it hard to say the right words.				
I find myself thinking about the same thing over and over again.				
I often wake up with many thoughts running through my mind.				
I would not hold a snake or spider.				
Looking down from a great height makes me freeze.				
I often find myself 'going into my shell'.				
My mind is dominated by recurring thoughts.				
I am the sort of person who easily freezes-up when scared.				
I take a long time to make decisions.				
I often find myself lost for words.				
I will actively put plans in place to accomplish goals in my life.				$\bigcirc$