

<u>No.</u>	<u>Student Name</u>	<u>SSN (4)</u>	<u>Injury</u>	<u>Sex</u>	<u>Race</u>	<u>Age</u>	<u>P1</u>	<u>P2</u>	<u>S1</u>	<u>S2</u>	<u>Time</u>
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