

OHIO ATHLETIC TRAINERS' ASSOCIATION

Athletic Training Student Scholarship Application

Demographic Information

Athletic Training Student's Name	Athletic Training Education Program (ATEP)
Street Address	City, State Zip
	- -
E-mail	Phone
/ /	
Date of Birth	Year in ATEP (e.g., junior or senior)
Declared Major & Minor (if applicable)	Anticipated Date of Graduation

Academic Achievements

<p>GPA</p> <p>.</p>	<p><input type="checkbox"/> no <input type="checkbox"/> yes If yes, please list:</p> <p>1.</p> <p>2.</p>
<p>GPA (round to nearest 0.00; e.g., 3.88, 3.54)</p>	<p>Have you attended more than one college/university? A transcript from every college/university you have attended must accompany this application.</p>
<p>Awards / Grants</p> <p>Please list any awards (scholarships, grants, etc) that you have received. These awards must have been earned while enrolled in college. Only include tangible awards that have been received (e.g., plaque, money, etc). Dean's list, Honorary Societies, Greek Awards, certificates, or financial aid from the college funding <i>does not</i> count.</p>	<p>1.</p> <p>2.</p> <p>3.</p> <p>4.</p> <p>5.</p> <p>6.</p>
<p>Presentations</p> <p>Please list all presentations that you have given. Include the title, date, and location of the presentation. Presentations that have been given as a requirement of a college course <i>do not</i> count.</p>	<p>1.</p> <p>2.</p> <p>3.</p>

<p>Publications</p> <p>Please list all publications that you have. A copy of the publication must accompany this application.</p>	<ol style="list-style-type: none"> 1. 2.
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Clinical Experiences

<p>Extra-Event Coverage</p> <p>Please list any extra-events (e.g., athletic camps, club competitions, tournaments, etc) for which you have volunteered. List only those events that are <i>not</i> a requirement for course credit.</p>	<ol style="list-style-type: none"> 1. 2. 3. 4. 5. 6. 7.
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Service Commitments

<p>Professional Meetings / Symposia</p> <p>Please list (with dates) all professional meetings and symposia related to Athletic Training that you have attended. A copy of the certificate of attendance, name badge, or letter of verification from an ATC must accompany this application.</p>	<ol style="list-style-type: none"> 1. 2. 3. 4.
<p>Professional Memberships</p> <p>Please list all professional organizations to which you are a member.</p>	<ol style="list-style-type: none"> 1. 2. 3.
<p>Professional Leadership</p> <p>Please list (with dates) any professional leadership positions and roles you have held while enrolled in an ATEP (e.g., club officer, OATA Senator, OATA Quiz Bowl).</p>	<ol style="list-style-type: none"> 1. 2. 3. 4.

<p>Other Service</p> <p>Please list (with dates) all other community service activities in which you have engaged while enrolled in the ATEP (e.g., Race for the Cure, Project Open Hand).</p>	<ol style="list-style-type: none"> 1. 2. 3.
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Personal Statement

Briefly explain why you chose Athletic Training as a major and what your post-baccalaureate career goals are. Also include a rationale for why you applied for this scholarship. Please limit your response to the space provided below.

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Letters of Recommendation

Who is your sponsoring ATC?	Who is writing your second letter of recommendation?

Applicant Checklist – The following items must accompany this application:

<input type="checkbox"/>	The completed application.
<input type="checkbox"/>	An official or unofficial transcript from every college / university you have attended.
<input type="checkbox"/>	Two letters of recommendation. One must be from a sponsoring ATC and one from anyone who can evaluate your academic, clinical, and leadership abilities.
<input type="checkbox"/>	Copies of attendance certificates, name badges, or letters of verification from an ATC for each professional meeting and symposium you have attended.
<input type="checkbox"/>	If applicable, copies of any publications you have.
<input type="checkbox"/>	Send completed application and requested information to: Sub chair of the Committee on Scholarships (See Committees link at www.OATA.org) <u>All</u> information must be postmarked by February 1 st .
<input type="checkbox"/>	I certify that the information contained in this application is correct and accurate to the best of my knowledge.
Signature of Scholarship Applicant	Date