

Anderson University Athletic Training Education Program



Application for Admission

Name: _____
Last First MI

Present Mailing Address: _____
Street

City State Zip Phone

Permanent Mailing Address: _____
Street

City State Zip Phone

Social Security Number: _____ Student ID Number: _____

Gender: _____ M _____ F

Transfer Student? _____ Yes _____ No

Classification: _____ Freshman _____ Sophomore _____ Junior _____ Senior

Academic Hours Completed: _____ Expected Date of Graduation: _____

Please check the following courses in which you are presently enrolled in or have completed. Indicate your present course grade in each:

_____ ATRG 1460, Grade: _____ _____ ATRG 2460, Grade: _____

_____ ATRG 1490, Grade: _____ _____ ATRG 1500, Grade: _____

Present Number of Clinical Hours: _____

Previous Experience

Any previous athletic training or related experience/observation? _____ No _____ Yes

If Yes, please provide the following information for each experience:

Place: _____

Dates of Experience/Observation: _____

Name of Supervisor: _____

Please explain any related experience or certifications that may enhance your qualifications for admission into the athletic training education program.

Honors/Awards

Please list any honors or awards you have received.

Extracurricular Activities

Are you an athlete at Anderson University? _____ No _____ Yes

If Yes, please indicate which sport(s) you participate in: _____

List any other Athletic Experience/Involvement:

List any involvement in Service Clubs:

List any involvement in your church or Campus Ministries:

List any involvement in Other Activities:

Personal Statement

Please provide a 2-3 page statement addressing why you have chosen to apply to the Athletic Training Education Program, why you want to be an athletic trainer, and your personal attributes that would make you a strong candidate for admission into the program.