



Entry-Level Undergraduate Athletic Training Student Scholarship Award

Application

Nominations Packet

*****Please Note*****

APPLICATION DEADLINE

Nominations must be received by April 1st !

Only PATS Inc. Certified and Certified-Retired Members
May nominate athletic training students

Send the complete Nomination Packet and applicable materials
to:

Chairperson, PATS, Inc. Honors and Awards Committee

Ellen West, MS, ATC

Keystone Hall 232 (Mailbox #: 114)

250 University Ave.

California University of PA

California, PA 15419

Phone (724) 938-4356 fax (724) 938-4324

west_e@calu.edu

INTRODUCTION:

The Pennsylvania Athletic Trainers' Society, Inc. is accepting applications to honor the outstanding students from the membership of P.A.T.S., Inc. These scholarships will be awarded to students who have demonstrated success academically and excel as athletic training students at their institutions. P.A.T.S., Inc. will present four awards (\$2,000.00 each) to deserving students. The scholarship is meant to encourage the recipient to pursue their education in athletic training or a related field.

Any Certified or Certified-Retired member of P.A.T.S., Inc. is to nominate no more than one candidate for this award. Additionally, no more than two candidates can be nominated from any one institution. The P.A.T.S., Inc. Certified or Certified-Retired member is responsible for establishing the candidate's eligibility.

All materials are to be completed (forms typed) and forwarded in one package to the Chair of the P.A.T.S., Inc. Honors and Awards Committee at the address listed on the cover of this packet. **This is the responsibility of the applicant.**

The P.A.T.S., Inc. Honors and Awards Committee will evaluate the candidate's applications, conduct formal interviews of the qualified candidates (at the convention), and announce its selections to the membership at the P.A.T.S., Inc. annual meeting in May/June.

CRITERIA FOR THE STUDENT SCHOLARSHIPS

To be eligible for consideration for a P.A.T.S., Inc. Scholarship, an applicant shall:

- have been a student member of PATS for a minimum of six months prior to the application deadline.
- Currently enrolled in an CAAHEP/CAATE approved/accredited curriculum in the Commonwealth.
- signify an intention to pursue the profession of athletic training as a means of livelihood
- distinguish oneself in service, clinically, and academically and excel as athletic training students at their institutions. The emphasis of these awards is student involvement outside of the classroom (above and beyond required experiences).
- perform with distinction as a member of the Athletic Training Student Program at their institution.
- conduct oneself both on and off the field in a manner which has brought credit to themselves, their institution, and/or intercollegiate athletics and higher education.

NOMINATING INSTRUCTIONS:

P.A.T.S., INC. UNDERGRADUATE SCHOLARSHIP AWARD:

1. Nominations shall be restricted to student members of P.A.T.S., Inc.
2. There are four forms to be completed and returned:
 - a. Student application completed and signed by the candidate.
 - b. Evaluation form to be completed and signed by the nominating athletic trainer.
 - c. Endorsement to be completed and signed by an academic professor.
 - d. Endorsement to be completed and signed by the College Dean, Department Chair or individual responsible for the nominee's academic program.
3. Please include the following with each application:
 - a. Official College Transcript
 - b. Scores or College Entrance Exams, (GRE's and/or MAT's) if available
 - c. Copies of applicable membership cards (PATS, Inc., NATA, etc.) Applicants must be a member of PATS at least 6 months
 - d. Resume (indicating honors, awards, voluntary service, experience, certifications, memberships, etc.)
4. The **Applicant** is responsible for collecting all materials and forwarding them to the Chairperson of the P.A.T.S., Inc. Honors and Awards Committee.

****Completed nomination packets must be received by the Honors & Awards Committee by April 1st. Any application packets received after the April 1st deadline may be returned to the applicant at the discretion of the Honors and Awards Committee Chairperson.

THE PENNSYLVANIA ATHLETIC TRAINERS' SOCIETY, INC.
STUDENT SCHOLARSHIP AWARD
STUDENT'S APPLICATION
(Please type all information)

Name: _____
Last, First, Middle

Date of Birth: _____, _____

College or University: _____ Graduation Date: _____

School Address: _____
Street, City, State, Zip

School Phone: _____

Permanent Address: _____
Street, City, State, Zip

Home Phone: _____

Cell Phone: _____

Email Address(es): _____

Overall Grade Point Average on 4.00 Scale after fall semester of senior year: _____

SAT / GRE: _____

How long have you been a member of the P.A.T.S., Inc.? _____ Year: _____

The N.A.T.A.? _____

Signature of Applicant: _____

Date: _____

STUDENT'S APPLICATION (CONTINUED) ACTIVITY PARTICIPATION

Organization/Activity

Leadership Position/Role Awards/Recognition

School or Class Offices:

Other (Civic, Religious, etc.)

ACADEMIC AWARDS

Honors Awarded by your School or Institution:

ATHLETIC TRAINING STUDENT ACTIVITIES

List duties other than normal work related duties you performed that are related to athletic training: (Such as EMT, emergency room volunteer, workshops and seminars attended, youth league volunteer, etc.)

ATHLETIC TRAINING STUDENT CLINICAL EXPERIENCE and ESSAY

**** Please limit your answer to ONE page or less – double spaced, 10 font**

Please write an essay about yourself. Include where you have been and where you want to go. Describe your most significant clinical experiences. In addition, please provide the committee with your professional goal(s) as it/they relate(s) to the athletic training profession.

THE PENNSYLVANIA ATHLETIC TRAINERS' SOCIETY, INC.
P.A.T.S. STUDENT SCHOLARSHIP PROGRAM

COLLEGE DEAN, DEPARTMENT CHAIR, PROGRAM DIRECTOR OR
ACADEMICIAN

Nominee's Name: _____
(Last) (First) (Middle)

Institution: _____

ACADEMIC PROGRESS

Degree Program:

Major:

Minor:

Certifications, etc.:

Hours required for graduation: _____ Hours completed toward graduation: _____

Expected Completion Date: _____

Cumulative Grade Point Average at Certifying Institution: _____

G.P.A. for Athletic Training Courses: _____

(Based on 4.00 Maximum)

TEST SCORES:

SAT: Verbal _____ Math _____ Total _____

ACT: Composite _____

National Merit: _____

GRE: Verbal _____ Quantitative _____ Analytical _____

Miller Analogy Test: _____

Signed: _____
Dean, Chair, or Program Director

Date: _____

**THE PENNSYLVANIA ATHLETIC TRAINERS' SOCIETY, INC.
P.A.T.S. STUDENT SCHOLARSHIP PROGRAM**

ACADEMIC PROFESSOR RECOMMENDATION FORM

This form is to be completed by a faculty member of the nominee's institution who is not associated with the athletic training program.

Please comment on the nominee's ability to pursue advanced study in athletic training or a related field:

Is there anything which might impede this individual's ability to pursue athletic training as a profession? If "Yes", please explain:

This evaluation is based upon the following criteria:

Student's performance in the following CLASS:

How long you have known applicant:

Signed: _____

Title: _____

Date: _____

THE PENNSYLVANIA ATHLETIC TRAINERS' SOCIETY, INC.

P.A.T.S. STUDENT SCHOLARSHIP PROGRAM

CERTIFIED ATHLETIC TRAINER - SUPERVISOR

RECOMMENDATION

Student's Name: _____
(Last) (First) (Middle)

Rating:

	Outstanding Top 5-10%	Excellent Top 25%	Good Top 40%	Unable to Judge
Ability to Communicate: Verbal				
Ability to Communicate: Written				
Ability to Relate to Co-workers				
Initiative and Work Ethic				
Dependability/Reliability				
Judgment/Common Sense				
Accepts Constructive Criticism				
Leadership				
Ability to Think Creatively				
Fitness for a Career in Athletic Training				
Earnestness about a Career In Athletic Training				

CERTIFIED ATHLETIC TRAINER - SUPERVISOR RECOMMENDATION

* Continued*

What are the nominee's greatest strength's?

Comment on the student's current clinical skills (e.g., injury recognition, evaluation, taping/wrapping, treatment and rehabilitation, organization and administration, counseling, etc.)

Please summarize the candidate's assets, liabilities and potential capabilities for a career as an athletic trainer and why you feel this applicant is more worthy of this scholarship than other students in the field.

Signature: _____ Date: _____

Name Printed: _____ BOC Cert#: _____

PA Cert#: _____

Address: _____
(Street) (City) (State) (Zip)

Telephone #: _____

Email Address: _____

* Reminder: Before mailing in this application be sure that it is complete. Keep a photocopy of all materials for your records