



**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:

**PATS, Inc. Honors and Awards Committee
C/O John Post, MBA, LAT, ATC (Co-Chair)
Eastern University
1300 Eagle Road
St. Davids, PA 19087
Phone (610) 341-1316 fax (610) 341-1317
jpost@eastern.edu**

INTRODUCTION:

The Pennsylvania Athletic Trainers' Society, Inc. is accepting applications to honor the outstanding students from the membership of PATS, Inc. These scholarships will be awarded to students who have demonstrated success academically and excelled as athletic training students at their institutions. PATS, Inc. will present five 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 PATS, 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 PATS, 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 PATS, Inc. Honors and Awards Committee at the address listed on the cover of this packet. **This is the responsibility of the applicant.**

The PATS, 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 PATS, Inc. annual meeting in May/June.



CRITERIA FOR THE STUDENT SCHOLARSHIPS

To be eligible for consideration for a PATS, Inc. Scholarship, an applicant shall:

- have been a student member of PATS for a minimum of six months prior to the application deadline.
- currently be enrolled in a CAATE approved/accredited curriculum in the Commonwealth.
- signify an intention to pursue the profession of athletic training as a means of livelihood
- distinguish oneself through service initiatives, clinical and academic performance, and excel as an athletic training student at their institution. 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 in a manner which has brought credit to themselves, their institution, and/or intercollegiate athletics and higher education.

NOMINATING INSTRUCTIONS

PATS, INC. UNDERGRADUATE SCHOLARSHIP AWARD

1. Nominations shall be restricted to student members of PATS, 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 all 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 PATS, 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: _____

Current Class/Year: (Jr, Sr, etc) _____ 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 current year: _____

SAT / GRE: _____

How long have you been a member of the PATS, Inc.? _____ Year: _____

The NATA? _____

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. Describe how you became interested in athletic training. Provide us with details on your most significant clinical experiences. In addition, please tell us about your professional goal(s) as it/they relate(s) to the athletic training profession.



THE PENNSYLVANIA ATHLETIC TRAINERS' SOCIETY, INC.
PATS STUDENT SCHOLARSHIP PROGRAM

COLLEGE DEAN, DEPARTMENT CHAIR, PROGRAM DIRECTOR OR
ACADEMICIAN

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

Institution: _____ Class/Year: _____

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.
PATS 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 the applicant:

Signed: _____

Title: _____

Date: _____



THE PENNSYLVANIA ATHLETIC TRAINERS' SOCIETY, INC.
PATS STUDENT SCHOLARSHIP PROGRAM
CERTIFIED ATHLETIC TRAINER – PRECEPTOR 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 - PRECEPTOR 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.**