Gustavus Adolphus College Athletic Training Program Application For Admission (Must be typed)

Demographics:			
Name			
Last	First	Mic	ldle
Home Address			
Street			
City	St	tate	Zip
Cell phone: ()			
Email:		_	<u></u>
Student ID Number: _			_
Gender:Female respond	MaleTrans	gender	Chose not to
Race/Ethnicity: Hispanic/Latino of American Indian or Asians, not Hispan Black or African Ar Native Hawaiian or White, not Hispani Two or more races Chose not the resp	r Alaskan Native, not ic/Latino nerican, not Hispanio Other Pacific Islando c/Latino	c/Latino	
Type of Student:			
Regular Student Transfer Student			
ITAIISIEI Student	nt Student		

PREREQUISITE ATHLETIC TRAINING COURSES TO BE COMPLETED

I have	requested f	from the	Registrars'	office	that an	official	transcript
be sent to	Mary Westh	y once fa	all grades ha	ave bee	n poste	d.	

In the mean time, please report your mid-term grade (if in progress) or final (if completed) for the prerequisite courses.

COURSE	Mid Term Grade	Final Grade
HES 200 First Aid and Cardiopulmonary Resuscitation		
HES 203 Introduction to Athletic Training		
HES 234 Anatomy & Physiology I		
HES 309 Biomechanics & Functional Anatomy		

Overall	Cumulative	GPA	(for	freshman	vearl	
Overan	Cumulative	ULV	ITOI	11 comman	veam	

1. List any experience that you have had in athletic training or related allied health care fields (besides Gustavus observation experience). Briefly describe your responsibilities and duties.

2. What are your immediate personal and professional goals?

3. What are your long-term personal and professional goals and aspirations?

Application Checklist Personal Statement Essay Technical Standards Document Scanned Immunization Reports (including Hepatitis B and flu vaccine) Scanned Completed Physical Form (within last 2 years) CPR and First Aid Cards (emailed when course is completed) Background check completed (demographic and fingerprints/photo) Scanned in Time Commitment Form signed by Coach or Director (if engaged in a large extracurricular/curricular time commitment, i.e. varsity sport, club sport, danceline, orchestra, or choir, etc.)
As an applicant for the Athletic Training Program offered at Gustavus Adolphus College, I do hereby verify that all of the above listed information is true. I further understand that any omission or misrepresentation of any part of the application information is grounds for immediate dismissal if I am accepted into the program. I acknowledge and accept the fact that my failure to submit a transcript by the beginning of the January term showing completion of required courses listed above currently being completed will result in my being dismissed from the program.
I also agree to allow my demographic information reported on this document to be shared with the Commission on Accreditation of Athletic Training Education (CAATE) as a means to track demographics and outcomes of the Gustavus Athletic Training program as part of its CAATE accreditation standards.
The Gustavus Adolphus College Department of Health and Exercise and Science seeks to provide equal access to its programs for all people regardless of race, gender, religious preference, etc.
E-Signature: Date:

4. What conflicts might you have for completing the clinical field

varsity athletics, choir, orchestra, etc.)?

expectations during your time in the athletic training program (e.g

RETURN TO:

Mary Westby, M.S.Ed., ATC Athletic Training Program Director <u>mwestby@gustavus.edu</u>