



**CAATE ACCREDITED
POST-PROFESSIONAL
GRADUATE ATHLETIC TRAINING
EDUCATION PROGRAM**

**DEPARTMENT OF HEALTH SCIENCE
CALIFORNIA UNIVERSITY OF PENNSYLVANIA
250 UNIVERSITY AVENUE
CALIFORNIA, PA 15419**

Application Instructions: Complete this form by typing in the spaces below. You can then print the form for your own records by clicking on the Print Form button at the top of this page. Then email or mail the form along with the other application materials.

Personal Data

Last Name _____ First Name _____ Middle Initial _____

Home Address: _____

City: _____ State: _____ Zip: _____

School Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Date of Birth: _____

Email Address: _____

Undergraduate Universities or Colleges Attended

School	State	Dates Attended
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School	State	Dates Attended
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Undergraduate Major: _____ Minor: _____

Cumulative Grade Point Average: _____ Athletic Training Grade Point Average: _____

Athletic Training Experience

Are you a BOC Certified Athletic Trainer? Yes No

If yes, BOC certification Number: _____ NATA Membership Number: _____

If no, date you will first take the BOC certification examination: _____

Please list any other certifications you have, i.e. CPR, etc.: _____

Please indicate which sports that you have had a clinical experience with at your institution:

- | | | | |
|-------------------------------------------|---------------------------------------------|-------------------------------------|----------------------------------------|
| <input type="checkbox"/> Basketball - Men | <input type="checkbox"/> Basketball - Women | <input type="checkbox"/> Baseball | <input type="checkbox"/> Cross Country |
| <input type="checkbox"/> Field Hockey | <input type="checkbox"/> Football | <input type="checkbox"/> Ice Hockey | <input type="checkbox"/> Lacrosse |
| <input type="checkbox"/> Soccer - Men | <input type="checkbox"/> Soccer - Women | <input type="checkbox"/> Softball | <input type="checkbox"/> Swimming |
| <input type="checkbox"/> Tennis | <input type="checkbox"/> Track & Field | <input type="checkbox"/> Volleyball | |

Please list any additional athletic training or related experiences:

Please indicate if you are applying for a graduate assistantship or a non-assistantship position.

- Graduate Assistantship (full tuition waiver and \$10000 stipend) Non-Graduate Assistantship

Essay

Please write a short essay on how you believe a degree from CalU will help you meet your professional goals.

