

IDAHO ATHLETIC TRAINERS' ASSOCIATION

Scholarship Application



CRITERIA FOR APPLICATION

I. To be eligible for consideration an applicant shall:

- A. Be an IATA Member (NATA dues include membership fees for both NWATA and IATA).
- B. Have established an overall minimum cumulative grade point average of 3.0 (based on a maximum of 4.0) or its equivalent by the time of application.
- C. Be enrolled as a graduate student in a CAATE accredited curriculum program in the state of Idaho.
- D. Be sponsored by an Athletic Trainer who is a current member of the Idaho Athletic Trainers' Association (IATA) and is Licensed with the State Board of Medicine.
- E. Have performed with distinction as a member of a related student program in his/her major which has brought credit to him/her, the institution, intercollegiate athletics, and the ideals of American higher education.
- F. Have signified his/her intention to continue academic work as a full-time student, and have been judged capable of this study by the Dean of the College or the Head of the Department in which he/she is enrolled.
- G. Intend to pursue the profession of athletic training as the primary means of livelihood.

II. After satisfying the above requirements, consideration shall be given to the applicant's participation in campus and community activities other than academic and athletic training, in which he/she has had the opportunity to demonstrate qualities of leadership and fellowship.

III. Once a scholarship has been awarded to an individual, that individual is no longer eligible for this scholarship.

APPLICATION INSTRUCTIONS

I. Nominations shall be restricted to athletic training students who become NATA members prior to March 1st.

II. There are **five** sections of the Scholarship Application to be completed:

- A. An application to be completed by the candidate and signed by the candidate and the nominating Licensed Athletic Trainer.
- B. An evaluation form to be completed and signed by the supervising Licensed Athletic Trainer.
- C. An essay to be written by the candidate and signed by the candidate and nominating Licensed Athletic Trainer.
- D. An endorsement to be completed and signed by the Dean of the College or the Head of the Department responsible for the nominee's academic program.
- E. An official transcript must be submitted from all academic institutions the candidate has attended.

III. The nominating Licensed Athletic Trainer is considered to be the individual responsible for collecting all official transcripts and the completed application and forwarding them directly to the chairperson of the scholarship committee. All completed applications, including official transcripts, must be postmarked by **June 1 or received via email by 11:59pm June 1**. There is no limit to the number of applicants a Licensed Athletic Trainer can nominate.

IV. **ALL PAGES OF THE SCHOLARSHIP APPLICATION MUST BE TYPED.**

V. The scholarship will be in the amount of \$500 for one year only. Only one scholarship is granted per year by the IATA.

VI. Application Checklist

- Scholarship Application completed by both applicant and nominating athletic trainer.
- Nominating athletic trainer Evaluation of nominee completed by nominating athletic trainer.
- Applicant Essay completed by applicant student athletic trainer.
- Academic Institution Representative Endorsement completed by Dean of College or Head of Department.
- Entire application postmarked by June 1 or received via email by 11:59pm June 1.

IDAHO ATHLETIC TRAINERS' ASSOCIATION

Scholarship Application



To be completed by athletic training student (*Must be typed*)

Name: _____

Last

First

Middle

Date of Birth: _____

NATA Member: Yes No

College/University: _____

College Address: _____

Street/PO Box/Apt. City State Zip

Undergraduate Degree/Field of Study _____

Phone Number: _____ Overall cumulative grade point average: _____

(Area Code)

(Based on a 4.0 maximum)

Level: Masters (Professional) Doctorate (Post Professional)

In which athletic training setting do you plan to practice?

High School

College/University

Clinical/Industrial/Corporate

Professional Sports

Tactical/Military

Performing Arts/Entertainment

International

Education

Other

Do you plan to make athletic training your primary field of professional endeavor after you complete your athletic training education program?

Yes No

Athletic training experience: _____

Awards/Recognitions: _____

Organizations/Activities/Affiliations: _____

Offices/Positions held (class, civic, religious, etc.): _____

Signature of applicant: _____ Date: _____

Nominating State Licensed Athletic Trainer:

Name: _____ Signature: _____

(print or type)

NATA Member: Yes No State Licensure #: _____

Date: _____

IDAHO ATHLETIC TRAINERS' ASSOCIATION

Licensed Athletic Trainer Evaluation of Nominee



To be completed by supervising Licensed athletic trainer *(Must be typed)*

Athletic Training Student's Name: _____

Last

First

Middle

Rating:	Outstanding (Top 10%)	Excellent (Top 25%)	Good (Top 40%)	Unable to Judge
Ability to Work/Relate to others				
Creativity				
Communication Skills				
Earnestness about a career in Athletic Training				
Independence				
Initiative				
Judgment/Common Sense/ Problem Solving				
Leadership				
Responsible				

Statement of Support:

Please provide a statement of support for the athletic training student being nominated for this scholarship in the space provided below. Comments may be made on the reverse side of this page or in an attached document labeled **Statement of Support**.

Supervising Licensed Athletic Trainer:

Name: _____ Signature: _____
(print or type)

NATA Member: Yes No

State Licensure #: _____

IDAHO ATHLETIC TRAINERS' ASSOCIATION

Athletic Training Student Essay

To be completed by athletic training student (*Must be typed*)



Use this space to give a statement concerning your athletic training background, leadership experience, campus, or community activities and/or volunteer experience, philosophy, and goals to support your application. Please limit your response to the length of this page.

.....
Name of Applicant: _____
(print or type)

Signature: _____ Date: _____

Name of Nominating Licensed Athletic Trainer: _____
(print or type)

Signature: _____ Date: _____

IDAHO ATHLETIC TRAINERS' ASSOCIATION

Academic Institution Representative Endorsement



To be completed by Dean of College or Head of Department (*Must be typed*)

Athletic Training Student's Name: _____
Last First Middle

Institution Name: _____

Degree Program: _____

Credit Hours Required: _____ Credit Hours Completed: _____

Expected Completion Date: _____

Overall Cumulative Grade Point Average of Academic Work: _____

(Based on 4.0 maximum)

Head of Department or Dean of College:

Name: _____
(print or type)

Signature: _____ Date: _____

THIS APPLICATION MUST BE COMPLETED AND SUBMITTED before 11:59pm June 1.
INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.

OFFICIAL TRANSCRIPTS MUST BE MAILED OR ELECTRONICALLY SUBMITTED TO:

Monica Kraack-Martin, ATC, LAT
IATA Scholarship
2000 S. Millennium Way
Meridian, ID 83642
Martin.monica@westada.org