

University of North Carolina-Wilmington
Athletic Training Education Program
 Application for Spring 2004 Admission

I wish to be considered for the Athletic Training Education Program.

Name	S.S. #	
Home Address	Phone ()	
City	State	Zip
Campus Address	Phone ()	
City	State	Zip
E-mail address:		
Cell Phone:		

Please put a check mark to the following question that only apply to you.

Classification:	Fr	Soph	Jr.	Sr
Non-teaching	Teaching		Pre-PT	
PA	EMT		Pre-med	
Academic Minor:				

References must come from a minimum of two faculty members. These individuals must know you well enough to evaluate your potential for the athletic training program. Complete the top portion of this form and have the faculty member fill out the recommendation form and have them return the forms directly to the Athletic Training Program Director. List below the members that will be filling out recommendations for you:

1.	2.
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Attach your two-page paper giving your reasons for choosing the Athletic Training as a profession.

Applicant's Signature _____ Date _____

Accepted into the Athletic Training Program

Not Accepted into the Athletic Training Program

Athletic Training Program Director _____ Date _____

Essay

On a separate sheet of paper please answer the following questions to the best of your ability. If you don't have enough knowledge or experience to answer a question, you may leave it blank, but it would be helpful for us to know how you feel on each of these questions.

Question 1

What do athletic trainers do? And what are some of the job settings that athletic trainers work in?

Question 2

Is athletic training primarily an "athletic" profession or a "health care" profession? Why?

Question 3

What are your future plans once you graduate from UNCW?

Question 4

What personal qualities do you possess that make you well-suited for this profession?

Question 5

Why are you interested in UNCW's Athletic Training Program?