



Athletic Training Education Program

Application for Admission

Please type or print legibly in ink

PERSONAL

Name _____ Student I.D.# _____
Permanent address _____
Street City State Zipcode
School address (if different) _____
Date of birth _____ Age _____ Home Phone _____ School Phone _____

EDUCATION

College(s) attended	Dates attended	Units completed	Cum GPA
1. _____			
2. _____			
3. _____			

High School(s) attended	Date of graduation	Cum GPA
1. _____		
2. _____		
3. _____		

SAT/ACT combined raw score _____
High School Honors _____

Community Honors _____

Hobbies/Recreational Interests _____

Person(s) who has/have influenced your life the most positively. Elaborate

Optional response:

Indicate the geographical location of your immediate family and the role family plays in your life.

PROFESSIONAL INTEREST AND PREPARATION

The profession of Athletic Training is defined as "*the prevention, care and treatment of injuries to athletes and active people.*" It is designated by the A.M.A. as an Allied Health Care profession

Indicate why you are interested in pursuing a career in Athletic Training

Have you observed Athletic Trainers in action? Explain where and when

Have you participated in Athletic Training in any of its various forms? Explain

What personal qualities do you possess that make you well suited for the Athletic Training profession?

Why are you applying for the Athletic Training Education Program at Point Loma Nazarene University?

Have you thoroughly read the requirements for admission to the PLNU ATEP on the website?

References

Please list three people who would be willing and able to provide information regarding your academic ability, personal character, work ethic and potential as an Athletic Trainer.

1. Name _____ Professional Position/Title _____
Phone _____
2. Name _____ Professional Position/Title _____
Phone _____
3. Name _____ Professional Position/Title _____
Phone _____

After you complete Section I of each of three reference forms ask your references to complete Section II and return to you in a sealed envelope (which you supply) with their signature across the seal.

Mail your application and the three envelopes with references enclosed to:

Dr. Jeff Sullivan
Director, Athletic Training Education
Point Loma Nazarene University
3900 Lomaland Dr.
San Diego, Ca 92106

Should you have questions please contact Dr. Sullivan at (619) 849.2629 or email: jeffsullivan@pointloma.edu
Thank you for applying for the ATEP at PLNU. We look forward to helping you realize your career goals.