

Prospective Athletic Training Student,

Thank you for the interest in the University of North Florida Athletic Training Education Program (ATEP).

The ATEP leads to a Bachelor of Science (BS) in Athletic Training and will prepare you for an entry-level career in the prevention, evaluation, treatment, and rehabilitation of athletic injuries and illnesses. In addition to classroom instruction, students will obtain hands-on experience in a variety of clinical settings which include area outpatient orthopedic clinics, high schools, professional teams, and intercollegiate teams at Jacksonville University and UNF. The Athletic Training Education Program is accredited by CAATE.

The ATEP is housed in the Brooks College of Health within the Department of Athletic Training & Physical Therapy. Students in the ATEP are provided with a unique opportunity to interact with students and faculty from other allied health care professions and to participate in a multi-disciplinary learning experience. The ATEPs' four full-time faculty members are committed to life-long learning and seek to provide opportunities for ongoing professional development for students in the ATEP as well as professionals in the field of athletic training.

The application process for the ATEP requires you to complete the attached supplemental application. Please fill out the Application completely and mail it back to the Brooks College of Health Advising Office at:

University of North Florida
Brooks College of Health Advising Office (Bldg 39/3025A)
1 UNF Drive
Jacksonville, Florida 32224-2645

You may contact the Brooks College of Health Advising Office if you have any additional questions at (904) 620-2812.

Once again, thank you for the interest in the University of North Florida Athletic Training Education Program.

Sincerely,

Joel W. Beam, EdD, LAT, ATC
Program Director

THE ATHLETIC TRAINING EDUCATION PROGRAM

University of North Florida
Brooks College of Health

FALL 2008 Admission Application

Complete this form and return it to the Brooks College of Health Advising Office (Bldg. 39/3025A)

THIS IS NOT AN APPLICATION TO THE UNIVERSITY OF NORTH FLORIDA. THIS IS A SUPPLEMENTAL APPLICATION FOR PROSPECTIVE STUDENTS TO BE CONSIDERED FOR ADMISSION INTO THE ATHLETIC TRAINING EDUCATION PROGRAM.

Please type Today's Date _____

Name _____ Date of Birth ____ / ____ / ____

Local Home Phone (____) _____ Soc. Sec. # _____

Local Home Address _____
Street apt#

City State ZIP

Permanent Home Phone (____) _____

Permanent Mailing Address _____
Street Apt#

City State ZIP

PREVIOUS CLINICAL HOURS

List any previous experience as a student athletic trainer or other related clinical observations.

Location #1 _____

Supervising Certified Athletic Trainer _____

Certification Number _____ Number of hours* _____

Location #2 _____

Supervising Certified Athletic Trainer _____

Certification Number _____ Number of hours* _____

You may attach an additional page if necessary

ESSAY

On a separate page, please tell us why you want to become a certified athletic trainer, and explain why you would make a suitable candidate for the Athletic Training Education Program.

Your essay should be 200 - 300 words.

THIS APPLICATION MUST BE RECEIVED IN THE BROOKS COLLEGE OF HEALTH ADVISING OFFICE BY MAY 16, 2008.

I attest that all of the information provided is correct.

Applicant's Signature

Date