

## ATEP ADMISSIONS REQUIREMENTS

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Pre-ATs seeking acceptance to the ATEP must submit an application to the Program Director by the **first Monday of December** of the sophomore year. Transfer students must meet this same deadline during their first fall semester at APU. In order to be consistent with standards required by the accrediting agency, the ATEP Program Director, in conjunction with the academic and clinical faculty, will determine the maximum allowable enrollment per year. The annual maximum enrollment will maintain a ratio of approximately 15 students per academic instructor per course and 8 students per preceptor per clinical site. All application materials (except the interview and ATEP admissions examination) must be submitted and verified at the time of the application. Acceptance into the program will be based on the following criteria:

1. Compliance with procedural steps which include:
  - a. A completed application form.
  - b. Verification of complete medical records [health history, immunization records (including Hepatitis B vaccine and TB test) and a pre-entrance physical examination (performed by APU Health Center staff)].
  - c. A signed Oath of Confidentiality regarding all medical information.
  - d. A completed Technical Standards form.
  - e. A minimum of two written recommendations. (These may not come from the Azusa Pacific University Sports Medicine staff; at least one must be from an APU employee.)
  - f. A signed Memorandum of Understanding indicating the applicant's responsibilities/options during the transition of the undergraduate ATEP to the entry-level masters (ELM) ATEP.
2. Academic ability as demonstrated by the following:
  - a. Minimum cumulative GPA of 2.5.
  - b. Minimum 3.0 average in the following (no courses below a "C"): AT 102, AT 160, AT 220 and AT 240.
  - c. "C-" or higher in the following courses: BIOL 101 or 151 and BIOL 250
  - d. A completed Current Grades form (if currently enrolled in a pre-requisite course).
  - e. Copies (front and back) of certification cards for CPR/AED for the Professional Rescuer and First Aid.
  - f. Complete an ATEP Admissions Examination:
    - i. Based on content from all prerequisite courses (AT 102, AT 160, AT 220, AT 240, BIOL 101 or BIOL 151, BIOL 250).
    - ii. This score contributes to student admission ranking.
3. Commitment to the field of Athletic Training as demonstrated by:
  - a. Completing all clinical observation experiences in athletic training.
  - b. Completing all Pre-Athletic Training psychomotor competencies (AT 240 – Observation in Athletic Training).
  - c. Submitting clinical evaluation forms from preceptors that supervised the student during the clinical observation.
4. Knowledge and interest in the field of Athletic Training as demonstrated by the following:
  - a. A written essay (minimum 2-3 double-spaced pages) which provides:
    - i. A detailed description of the profession of athletic training.
    - ii. A chronological description of the history of the profession of athletic training and key leaders of the profession.
    - iii. An explanation of the roles and responsibilities of a Certified Athletic Trainer (AT).
  - b. A 2-3 page professional cover letter (see Program Director or visit <http://owl.english.purdue.edu/owl/resource/723/03/> for examples) detailing:
    - i. Why you desire to become a Certified Athletic Trainer (AT).
    - ii. A description of your personal and professional strengths.

- iii. A description of the area(s), which present(s) the greatest challenge to you.
  - iv. A discussion of any circumstances or situations that may affect your ability to complete the program (especially clinical experiences) such as needing to work, church responsibilities, being an intercollegiate student-athlete, etc.
5. Complete a face-to-face interview conducted by the ATEP academic and clinical faculty.

The Azusa Pacific University ATEP academic faculty will evaluate each applicant and reach a decision regarding his or her acceptance. Applicants will be notified of their status no later than the **first day of classes in January**. Students not accepted into the program will meet with the Program Director to develop an alternative plan that may include reapplication for the following year and/or other academic options.

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## ATEP APPLICATION INSTRUCTIONS

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1. Verification of Medical Records (application form #1.b): Make an appointment with the Student Health Center for an “athletic” physical. A staff member of the Health Center must initial and date your application form to verify that all records are complete, up-to-date and on file. Copies of your medical records should NOT be submitted with the application.
2. Signed Oath of Confidentiality (application form #1.c): This form, included in the application packet, must be signed, dated, witnessed (by an ATEP faculty member from Azusa Pacific University) and included with your application.
3. Signed Technical Standards Form (application form #1.d): This form is to verify that you have the mental, psychological, and physical capabilities to perform as an athletic training student. If you have any questions about your ability, please contact the Program Director and/or the Learning Enrichment Center.
4. Two Written Recommendations (application form #1.e): Two blank recommendation forms are included in the application packet. One recommendation should be from an APU faculty member (non-Athletic Training). The other can be from a second APU faculty member or other individual (non-student) who knows you well. At least one of these recommendations must be from an APU employee. Make sure to give the individuals you select plenty of time to complete the recommendation. Ask them to return it to you so you can include it with your completed application. (The recommendations should be given to you in a sealed envelope with the recommender’s signature across the seal.)
5. Signed Memorandum of Understanding (application form #1.f): This form, included in the application packet, must be signed, dated, witnessed (by an ATEP faculty member from Azusa Pacific University) and included with your application.
6. Academic requirements (application form #2.a-e): Document your cumulative GPA by logging on to the Student Services Center at [home.apu.edu](http://home.apu.edu). You will find your cumulative GPA listed at the bottom of the “academics” tab. You must also obtain an unofficial transcript from the Registrar’s Office or via [home.apu.edu](http://home.apu.edu) with all pertinent pre-requisite courses highlighted. (See courses listed on application form.) On the application form, fill in the semester that the course was completed and the grade earned for each. If you are currently enrolled in a pre-requisite course, you must include a **Current Grade Form** indicating your current grade in the pre-requisite course. Finally, to verify that you are currently certified in CPR/AED for the Professional Rescuer and First Aid, please submit copies (front and back) of your certification cards.
7. Completion of clinical observation experiences in athletic training (application form #3.a): Document the completion of each clinical observation experience which occurred during AT 240 – Observation in Athletic Training. This information can be obtained from the course instructor.
8. Completion of Pre-Athletic Training Psychomotor Competencies (application form #3.b): Document the psychomotor competencies completed on the Student’s Clinical File Summary Form (See Psychomotor Competency Packet for AT 240).
9. Submission of clinical evaluation forms (application form #3.c): For each clinical preceptor that supervised the applicant during clinical observation for a minimum of 15 hours, submit a clinical evaluation form. This form can be obtained from the course instructor.
10. Written essay and professional cover letter (application form #4): A written essay must be submitted typed, double spaced, and a minimum of two to three (2-3) pages in length. A font size no larger than

12 points must be used. Pay close attention not only to the content of your essay, but also to grammar and spelling. Remember, your written words will be influential in the acceptance process to the ATEP. You may want to take full advantage of assistance available to you at the Writing Center. The content of your essay should include the following:

- a. A detailed description of the profession of athletic training.
- b. A chronological description of the history of the profession of athletic training and key leaders of the profession.
- c. An explanation of the roles and responsibilities of a Certified Athletic Trainer (AT).

In addition, to describe your interest/motivation in pursuing athletic training as a career, you are asked to present a professional cover letter (see Program Director or visit

<http://owl.english.purdue.edu/owl/resource/723/03/> for examples). The cover letter must include:

- a. Why you desire to become a Certified Athletic Trainer (AT).
- b. A description of your personal and professional strengths.
- c. A description of the area(s), which present(s) the greatest challenge to you.
- d. A discussion of any circumstances or situations that may affect your ability to complete the program (especially clinical experiences) such as needing to work, church responsibilities, being an intercollegiate student-athlete, etc.

11. Written Examination (application form #5): A 50-point multiple-choice exam will be taken. The purpose of this exam is to allow the student to demonstrate their knowledge of key concepts from the pre-requisite courses. The exam will be scheduled prior to Finals Week of the fall semester.
12. Interview (application form #6): Qualified candidates will be invited to an interview. Take the time to practice for the interview. You will be much more relaxed if you take the opportunity to have someone ask you similar questions related to what you wrote in your essay. The interviews for each candidate will be conducted by ATEP faculty and various preceptors. Areas evaluated will be oral communication skills, your consistency in answering questions, and your problem solving ability.

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### ATEP APPLICATION

Student's Name: _____	ID Number: _____
Campus Address: _____	Cell #: _____
Campus Box #: _____	Preferred Email address: _____
Home Address: _____	_____
_____	_____

**1. Procedural steps required prior to application deadline:**

- a. Completion of this application form
- b. Verification that complete medical records are on file in the Health Center (HC) including the following:
 

	<i>HC Staff Initials &amp; Credentials/Date</i>
(1) health history:	_____ / _____
(2) immunization records (including Hepatitis B vaccine/titer and TB):	_____ / _____
(3) pre-entrance physical examination:	_____ / _____
(4) verification that student is able to meet the physical and mental requirements (with or without accommodation) of an athletic trainer:	_____ / _____
- c. Signed Oath of Confidentiality\*
- d. Signed Technical Standards form\*
- e. Two written recommendations\*
- f. Signed Memorandum of Understanding\*

**2. Academic requirements**

- a. Cumulative GPA: \_\_\_\_\_ as of this date \_\_\_\_\_
- b. Grade for each of the following:
 

	<i>Semester</i>	<i>Grade</i>
AT 102	_____	_____
AT 160	_____	_____
AT 220	_____	_____
AT 240	_____	_____
BIOL 101 or BIOL 151	_____	_____
BIOL 250	_____	_____

- c. Unofficial transcript with above courses highlighted\*
- d. Current Grade form (if you are currently enrolled in a pre-requisite course)\*
- e. Copies (front and back) of current CPR/AED for the Professional Rescuer and First Aid cards\*

**3. Completion of the following:**

- a. All clinical observation experiences (AT 240): \_\_\_\_\_ *Number completed*  
(hours)
- b. Pre-A.T. Psychomotor Competencies (Student's Clinical File Summary form): \_\_\_\_\_
- c. Clinical evaluation forms (AT 240)\*

**4. Written essay and professional cover letter\*.** (Refer to ATEP Application instructions for further details.)

**5. ATEP Admissions Examination** (student will be notified of the exam date/time after application deadline).

**6. Interview scheduled** (student will be notified of interview date/time after application deadline).

*\*Submit these required items with the application.*

*Completion of this application and fulfillment of all requirements is the sole responsibility of the athletic training student candidate. Completed applications must be submitted to the Program Director by the first Monday of December.*

## OATH OF CONFIDENTIALITY

As an athletic training student, I understand that I have an obligation to myself, to my clinical supervisors, to all student-athletes, coaches, patients at Azusa Pacific University and our affiliated sites, to withhold any information that I acquire professionally or socially which is considered confidential, from anyone other than my immediate supervisors. Included in this information is anything relative to the patient's medical condition, the treatment and rehabilitation of any medical condition and any information which I acquire during the conduct of my academic and professional duties, or any information that is not considered to be public knowledge. I am aware that any breach of this trust may jeopardize my ability to continue serving in the capacity of an athletic training student in the Athletic Training Education Program at Azusa Pacific University.

Furthermore, I understand that as an athletic training student I have been provided with a responsibility to uphold the Code of Ethics as outlined by the National Athletic Trainers' Association ([http://www.nata.org/codeofethics/code\\_of\\_ethics.pdf](http://www.nata.org/codeofethics/code_of_ethics.pdf)) and the Standards of Professional Practice as provided by the Board of Certification, Inc. (<http://www.bocatc.org/>).

I am aware that copies of these documents are available for my review through the Athletic Training Education Program at Azusa Pacific University.

Student's name (print): \_\_\_\_\_

Student's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness's signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Technical Standards for Individuals Seeking the Bachelor of Arts Degree in Athletic Training

The Athletic Training Education Program at Azusa Pacific University is rigorous and intense. This program is designed to prepare graduates to enter a variety of employment settings and to render care to a wide spectrum of individuals engaged in physical activity. The following technical standards are those that students must maintain to manage coursework, internships, and employment as an entry-level athletic trainer.

Compliance with the program's technical standards does not guarantee a student's eligibility for the Board of Certification, Inc. (BOC) examination to become a certified athletic trainer (AT).

Students must meet and maintain:

1. Physical strength to lift, move, push, or carry a minimum of 40 pounds.
2. Physical stamina to remain upright for extended periods of time (sometimes longer than 2 hours) and to move to and from various locations using stairs, ramps, and/or elevators.
3. Physical agility to perform physical tasks from the floor or low levels to tables and equipment located at heights up to 4 feet.
4. Fine and gross motor dexterity to scribe forms and reports or input information using a computer device or keyboard and/or to connect various equipment items, or secure or remove hoses, hooks, or electrical plugs, or manipulate cabinet locks and doors.
5. Visual acuity to view physical characteristics of others and distinguish color, numbers, data, graphs, and words on instrument monitors and panels.
6. Hearing at a level to discern various emergency sounds coming from vehicles, equipment, and/or people.
7. Hearing acuity to accurately distinguish words and localize sounds coming from within an area, or a speaker system, or telephone conversation, or from individuals within and not within visual sight.
8. Verbal competence in correct and clear elocution of words for emergency (911) calls, exchange of information, follow through on tasks, or for dialog with others.

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*I certify that I have read and understand the technical standards and believe to the best of my knowledge that I meet these standards.*

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

Support Services: Students in this degree that have a disability that might prevent them from fully demonstrating their abilities should meet with an advisor in the Learning Enrichment Center (<http://www.apu.edu/lec/>; (626) 815-3849) as soon as possible to initiate disability verification and discuss accommodations that may be necessary to ensure full participation in the successful completion of degree requirements.

**RECOMMENDATION FORM FOR ADMISSION**

Name of Student \_\_\_\_\_ Date \_\_\_\_\_

Note to Student: Signing below indicates that you will give up the right to read this reference. If you do not sign, you may review this recommendation.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Basis for Rating the Student:

\_\_\_\_ I know this student well through personal contact in the following context: \_\_\_\_\_

\_\_\_\_ I know this student fairly well in the following context: \_\_\_\_\_

\_\_\_\_ I have a general acquaintance with this student in the following context: \_\_\_\_\_

**Please rate this student with respect to other students you know at the same level.**

	<u>Below Average</u>		<u>Average</u>		<u>Above Average</u>
1. Intellectual Ability	1	2	3	4	5
2. Attitude	1	2	3	4	5
3. Maturity	1	2	3	4	5
4. Dependability	1	2	3	4	5
5. Initiative	1	2	3	4	5
6. Cooperativeness	1	2	3	4	5
7. Verbal Communication Skills	1	2	3	4	5
8. Written Communication Skills	1	2	3	4	5





**RECOMMENDATION FORM FOR ADMISSION**

Name of Student \_\_\_\_\_ Date \_\_\_\_\_

Note to Student: Signing below indicates that you will give up the right to read this reference. If you do not sign, you may review this recommendation.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Basis for Rating the Student:

\_\_\_\_ I know this student well through personal contact in the following context: \_\_\_\_\_

\_\_\_\_ I know this student fairly well in the following context: \_\_\_\_\_

\_\_\_\_ I have a general acquaintance with this student in the following context: \_\_\_\_\_

**Please rate this student with respect to other students you know at the same level.**

	<u>Below Average</u>		<u>Average</u>		<u>Above Average</u>
1. Intellectual Ability	1	2	3	4	5
2. Attitude	1	2	3	4	5
3. Maturity	1	2	3	4	5
4. Dependability	1	2	3	4	5
5. Initiative	1	2	3	4	5
6. Cooperativeness	1	2	3	4	5
7. Verbal Communication Skills	1	2	3	4	5
8. Written Communication Skills	1	2	3	4	5



## MEMORANDUM OF UNDERSTANDING

The undergraduate Athletic Training Education Program (ATEP) will transition to an entry-level masters (ELM) graduate program by 2016. This transition is being made in response to changes within the athletic training profession and in order to maintain a high quality educational experience for athletic training students. Applications to the undergraduate ATEP will continue to be accepted in fall 2012 and fall 2013. The last cohort of students admitted to the undergraduate ATEP, during the fall 2013 application period, must complete the program by spring 2016 to be eligible to take the national Board of Certification, Inc. examination for athletic trainers. There will be no exceptions.

If students do not complete the undergraduate ATEP by spring 2016, they have the following options to attain certification exam eligibility:

1. Transfer to an accredited program at a different university
2. Seek admission to the new ELM program at APU

For further information, please contact the program director of athletic training education.

Student's name (print): \_\_\_\_\_

Student's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness's signature: \_\_\_\_\_ Date: \_\_\_\_\_



**Azusa Pacific University  
Athletic Training Education Program  
Application Score Sheet**

Student's Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Section A: Basic requirements**

*Yes*

*No*

- |   |       |       |
|---|-------|-------|
| a. Completed application  | _____ | _____ |
| b. Verification of completed medical records  | _____ | _____ |
| c. Signed oath of confidentiality   | _____ | _____ |
| d. Signed Technical Standards   | _____ | _____ |
| e. Signed Memorandum of Understanding   | _____ | _____ |
| f. Grade of "C-" or higher in BIOL 101 or 151 and BIOL 250                              | _____ | _____ |
| g. Minimum 3.0 average with no course below a "C" in AT 102, AT 160, AT 220, and AT 240 | _____ | _____ |
| h. Current grades form  | _____ | _____ |
| i. Copies of CPR/First Aid cards  | _____ | _____ |
| j. Completed clinical observation experiences   | _____ | _____ |
| k. Completed AT 240 psychomotor competencies  | _____ | _____ |
| l. Overall GPA of at least 2.5  | _____ | _____ |

**Application continues only if all of the above are "Yes"**

**Section B: Weighted Requirements**

*Points*

- |  |       |
|--|-------|
| 1. Written recommendations ( <b>weighted 10%</b> ):                  |       |
| a. First reference (5 points)  | _____ |
| b. Second reference (5 points)                                       | _____ |
| 2. Academic standing ( <b>weighted 20%</b> ):                        |       |
| Cumulative GPA: _____ x 5 = Points (4.0 scale)                       | _____ |
| 3. Written essay ( <b>weighted 5%</b> ):                             |       |
| Average Score: _____ x .208 = Points (24 pt. scale)                  | _____ |
| 4. Professional cover letter ( <b>weighted 10%</b> ):                |       |
| Average Score: _____ x .417 = Points (24 pt. scale)                  | _____ |
| 5. Exam Score ( <b>weighted 20%</b> ):                               |       |
| Score: _____ x .40 = Points (50 pt. exam)                            | _____ |
| 6. Clinical Evaluations Score ( <b>weighted 20% each</b> ):          |       |
| Average preceptor evaluation score: _____ x 4 = Points (5 pt. scale) | _____ |

**Subtotal**

\_\_\_\_\_

**Initial Ranking Among All Applicants**

\_\_\_\_\_

**Section C: Top 15 Candidates from Section B, then others as openings allow**

Interview Score (**weighted 15%**)

Average Score: \_\_\_\_\_ x .46875 = Points (32 pt. scale)

**Total Score**

\_\_\_\_\_

**Final Ranking Among All Applicants**

\_\_\_\_\_

Accepted \_\_\_\_\_ Not Accepted: \_\_\_\_\_ Reason for Non-Acceptance: \_\_\_\_\_

Program Director's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: