**I. Eligibility Requirements**

1. Applicant must be currently enrolled as a full-time student in a Michigan College/ University professional athletic training program with the intention of becoming a BOC Certified Athletic Trainer.
2. Applicant must be a current member of the Michigan Athletic Trainers Society (will be verified and needs to be renewed every January).
3. Applicant must have at least one year remaining of professional athletic training education.
4. Applicant must have grade point average (GPA) of 3.2 (based on a 4.0 scale) for ALL professional education courses to date.

**II. Application Instructions**

1. All sections of the application packet must be fully completed as directed.
2. All information in the application packet must be typed.
3. Incomplete application packets will not be processed.
4. A fully completed application packet must be e-mailed to Eliza MacDonald, MPA, AT, ATC no later than 5:00 pm March 31, 2024 at mats.cecat@gmail.com. Please e-mail as one document.

**III. Evaluation and Award Process**

1. MATS Athletic Training Student scholarship may vary from $500 to $1,000. Up to two scholarships may be awarded for the 2024-2025 academic year.
2. Need shall not be a factor in granting MATS Athletic Training Student scholarships. Assistance from other sources will not make the applicant ineligible for a scholarship.
3. Applicants will be evaluated primarily on their involvement in the athletic training profession, but consideration will also be given to the applicant’s participation in campus activities other than academic and athletic training, in which he/she has demonstrated qualities of leadership and has been a positive example to fellow students.
4. The selected applicant(s) must provide proof of enrollment in a professional athletic training program for the 2024-2025 academic years before a check will be issued and is expected to remain enrolled as a full-time student.

Any questions, please contact Eliza MacDonald, MATS Committee for Early Career Advancement Committee Chair, at 616.331.8877 or mats.cecat@gmail.com

**Section I: General Information**

Applicant’s Name:

                                                   Last                        First                             Middle

Date of Birth:                                                            MATS Member Since:

Name of Institution:

Permanent Address:

                                                     Street                                City

 State               Zip

School Address:

                                                     Street                                City

 State               Zip

Phone Number:

Email:

**Section II: Involvement**

Please list the following.

Athletic Training Experience (ie: high school, collegiate, clinic/physician office, internship, etc.):

Memberships in professional organizations (include date initiated and member #) (ie: MATS, NATA, ACSM, etc.):

State, regional, or national athletic training leadership positions (ie: MATS Athletic Training Student Committee, GLATA Student Senate):

Other current leadership positions:

Research presented or published. Include contributors, title, presentation type and presentation location:

Volunteer involvement (include duration/number of hours, does not need to be related to athletic training):

Seminars/conferences that you have attended (include name and dates):

List any national, regional, or state athletic training awards (not including Dean’s List):

I (do             ) (do not           ) plan to pursue the athletic training profession as my primary means of livelihood.

**Section III: Institutional Endorsement**

To be completed by the Athletic Training Education Program Director. Please type.

Applicant’s Name:

                                                   Last                                    First                           Middle

Name of Institution:

Applicant’s Degree Program:

Major:                                                        Minor (if applicable):

Academic Credit Hours Completed:

Expected Completion Date for Degree:

Cumulative overall GPA for ALL undergraduate course work to date:

I certify that the above applicant is enrolled at our institution and that the above information is accurate.

Name:

Title:

BOC #:

Date:

**Section IV: Applicant Essays**

Please answer the following questions. Each answer is limited to 250 words.

1. Describe your personal/professional philosophy.
2. What does it mean to you to be a leader in athletic training?
3. Identify a current issue in athletic training, and as a practicing athletic trainer, how you would address it if given the opportunity.
4. What are your future plans and goals and how will you continue to promote the athletic training profession?

**Section V: Signature**

I hereby confirm that all of the foregoing information is true and correct.

Signature of Applicant:                                                     Date: