***Vermont Association of Athletic Trainers***

Application Packet for the

Eduardo “Chico” Hernandez (NATA D1)
& John Feenick (VAAT) Scholarships

**Application Deadline**Applications must be received by April 15th

**A maximum of two candidates from one Athletic Training Program may be nominated for this scholarship each year.** Athletic Training Program administrators, faculty and staff are encouraged to select the two best-qualified candidates for the award based on the listed eligibility criteria.

**Previous Scholarship Winners\* are not eligible for nominations**

(\*Previous winners of the D1 scholarship or VAAT scholarship are eligible
to receive the other award)

**Please electronically submit all forms contained within this application packet (either as MS Word or PDF files) to:**

Reese Barber, MS, ATC

Chair, VAAT Scholarship Committee

Glenbrook Gymnasium

Castleton University

Castleton, VT 05735

Reese.barber@castleton.edu

Candidates should email the “Student Application” form directly to the Scholarship Committee Chairperson. Confidential items such as the “Academic Faculty Recommendation” form and the “Preceptor Recommendation” form should be emailed or faxed directly to the Chair by the individual completing the form; however, these must also be received before the deadline. Electronic submission of all materials to the Chair is strongly encouraged.

**It is the sole responsibility of the applicant to verify all materials have been sent to, and received by the Scholarship Committee Chair prior to the stated deadline.**

IntroductionThe Vermont Association of Athletic Trainers (VAAT), in cooperation with District One of the National Athletic Trainers’ Association (NATA) is committed to honoring outstanding athletic training students from the VAAT membership who have excelled academically and clinically. At present, one $2500 grant and one $500 grant will be awarded annually to students who have participated with distinction in a university athletic training program. These awards are meant to encourage the recipients to continue their educational development in the athletic training profession.

# Process

1. Recipients will be selected by a scholarship committee composed of members from the VAAT based upon review of the selection criteria and a specified point system for review (see selection criteria).
2. Applications must be submitted by April 15th.
3. Applications and support materials should be sent to Reese Barber, MS, ATC, VAAT Scholarship Committee Chair via email @ reese.barber@castleton.edu
4. Direct any questions to, or request of materials from: Reese Barber, Chair, VAAT Scholarship Committee Chair @ 802-468-1435 or reese.barber@castleton.edu

# Eligibility Criteria

To be eligible for consideration, applicants should:

1. Distinguish themselves academically.

a. For students engaged in a four-year undergraduate program, records shall be judged on their cumulative Grade Point Average (GPA) at the completion of the fall semester of either the junior or senior year. All applicants should have a minimum GPA of 3.0.

2. Perform with distinction as a member of the athletic training program.

3. Signify an intention to continue academic work toward a baccalaureate degree as a full-time undergraduate student. NOTE: The recipient of a VAAT scholarship is expected to remain enrolled in an undergraduate program except for military service or religious obligations.

4. Signify an intention to pursue the profession of athletic training as a means of livelihood.

5. Conduct themselves, both clinically and in the classroom, in a manner that has brought credit to themselves and their institution.

6. Be a current member of the NATA at the time of application.

NOTE: After satisfying the above requirements, consideration shall be given to students’ participation in campus activities other than academic and athletic training in which they have had an opportunity to demonstrate qualities of leadership and serve as an example to their fellow students.

Selection CriteriaThe VAAT Scholarship Committee will evaluate applications based on the following point system:

 1. Grade Point Average (based on 4.00 scale) – 20 points maximum2. Athletic Training Related Course Work GPA – 5 points maximum3. Activity Participation – 10 points maximum4. Student Essay – 15 points maximum5. Academic Faculty Recommendation – 20 points maximum6. Preceptor Recommendation – 20 points maximumThe VAAT Scholarship Committee will screen the candidates and announce its selection for both scholarships prior to the annual VAAT Spring/Summer meeting. **Nomination and Submission Instructions**

1. Nominations shall be restricted to students who are members of the NATA and enrolled as full-time students in a Vermont higher education institution.
2. **A maximum of two candidates from one Athletic Training Program may be nominated for this scholarship each year.** Athletic Training Program administrators, faculty and staff are encouraged to select the two best-qualified candidates for the award based on the listed eligibility criteria.
3. The checklist of materials required to complete the application are:

a. The application form **to be completed by the student applicant**, including the student essay and a copy of the student’s NATA membership card;

b. A recommendation form to **be completed by an academic faculty member**;

c. A recommendation form **to be completed by a preceptor;**

d. An Academic Progression and Transcript Verification form completed **by the chair of the department, or program director that is responsible for the applicant’s academic program.** This form is to be accompanied by an official or unofficial transcript and emailed or faxed to the Chair of Scholarship Committee.

4. The student is responsible for completing the Student Application and requesting the completion of the Academic Faculty Recommendation Form, the Preceptor Recommendation Form, and the Academic Progression and Transcript Verification Form. These forms should be submitted directly to the Scholarship Committee Chair by the individual completing the form (to maintain confidentiality) prior to the application deadline. The Chairperson will organize each applicant’s file into individual folders as they are received; however, the student is responsible for verifying all materials have been received.

5. Once a completed application packet is received, the Chairperson will disseminate all materials to the Scholarship Committee members for review.

**THE VERMONT ASSOCIATION OF ATHLETIC TRAINERSUNDERGRADUATE SCHOLARSHIP PROGRAM**

**Student Application – Page 1 of 2 (Please type all information.)**

Name: (Last, First Middle)Date of Birth:       College or University:      Local Mailing Address:

 (City, State, Zip Code)

Local Phone:

Home Phone:

Email Address:      Current Class Standing (Jr / Sr):Undergraduate Major:

Minor:       Overall Grade Point Average (at least four semesters) on a grade scale of 4.00:      Are you currently serving as an athletic training student? Yes No      Are you a member of the National Athletic Trainers’ Association? Yes No How long have you been a member of the NATA?      Years      MonthsAre you currently planning to make athletic training your primary field of professional endeavor after graduation? Yes No If not, in what occupation do you plan to engage?      Have you received any honors or awards from your institution? Yes No

If you have received any honors or awards from your institution, please list them here:

**Student Application Continued – Page 2 of 2**

**Activity Participation**

**Athletic Training Activities**List clinical assignments and the duties necessary for their satisfactory completion:

|  |  |
| --- | --- |
| Clinical Assignment and Dates | Duties |
|       |       |
|       |       |
|       |       |
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|       |       |
|       |       |
|  |  |

Number of hours of athletic training experience you have gained under direct supervision of a preceptor while in the professional phase of your AT Program: \_\_\_\_\_\_\_\_\_\_

List other healthcare related volunteer work: (Such as EMT, emergency room volunteer, high school volunteer, athletic training aide, youth league teams’ athletic training student, etc.)     **Activity Participation (Other than Athletic Training)**

College Organization/Activity Description/Leadership Position Dates Awards/Recognition

School or Class Offices:

Other (Civic, Religious, etc.)

**Student Essay Instructions**Please state the reasons you had for selecting Athletic Training as a professional program. Also, describe your undergraduate studies and what experiences have helped shape you as a professional. Speak to your strengths as well as your areas for improvement. Also include information on your future plans. Please use a separate document and type in Times New Roman 12 point font double-spaced. Limit your essay to 350 words or less.

***Application Form Checklist:***[ ]  Student Application[ ]  Student Essay[ ] Copy of NATA student membership card[ ]  Academic Faculty Recommendation[ ]  Preceptor Recommendation

[ ]  Academic Progression and Transcript Verification

***By submitting this document to the VAAT Scholarship Committee Chair I state that the above information is submitted as truthful to the best of my knowledge and that I have made no attempt to misrepresent myself in any way. Please initial here to verify you have read and agree to this statement:\_\_\_\_\_\_\_\_\_\_***Name of Applicant:      Date:

**THE VERMONT ASSOCIATION OF ATHLETIC TRAINERSUNDERGRADUATE SCHOLARSHIP PROGRAMACADEMIC FACULTY RECOMMENDATION**

**Page 1 of 2**

Student’s Name:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Rating:** | **Outstanding****Top 5-10%** | **Excellent****Top 25%** | **GoodTop 40%** | **Unable to Judge** |
| **Ability to Communicate (Verbal)** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Ability to Communicate(Written)** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Ability to Relate toColleagues** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Initiative and WorkEthic**  | [ ]  | [ ]  | [ ]  | [ ]  |
| **Dependability /Reliability** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Accepts Responsibility** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Judgment / CommonSense**  | [ ]  | [ ]  | [ ]  | [ ]  |
| **Accepts ConstructiveCriticism** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Leadership** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Ability to think Creatively** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Fitness for a Career in Athletic Training** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Earnestness about a Career in Athletic Training** | [ ]  | [ ]  | [ ]  | [ ]  |

Has the candidate had any academic, emotional, or disciplinary problems, which might impede his/her pursuit of athletic training? [ ] Yes [ ]  No If “Yes,” please explain:

 **ACADEMIC FACULTY RECOMMENDATION**

**Page 2 of 2**

Please comment on the applicant’s abilities as an athletic training student as well as his/her qualifications to carry on advanced study in his/her chosen field. Specifically address the applicant’s assets, liabilities, and potential capabilities for a career as an athletic trainer, and why you feel this applicant is more worthy of this scholarship than other students currently enrolled in an AT Program. **You may attach a letter of support or fill in the area below.**

Name:       Date:

Title:     Place of Employment:

 Email:      Phone:      BOC Certification #:       NATA Membership #:

**Please email or fax this form to: Reese Barber at** **reese.barber@castleton.edu** **(fax: 802-468-2189)**

***\* Please keep a copy of all materials before mailing and keep them on file in case this application is lost.***

**THE VERMONT ASSOCIATION OF ATHLETIC TRAINERSUNDERGRADUATE SCHOLARSHIP PROGRAMPRECEPTOR RECOMMENDATION**

**Page 1 of 2**

Student’s Name:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Rating:** | **Outstanding****Top 5-10%** | **Excellent****Top 25%** | **GoodTop 40%** | **Unable to Judge** |
| **A****bility to Communicate (Verbal)** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Ability to Communicate(Written)** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Ability to Relate toColleagues** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Initiative and WorkEthic**  | [ ]  | [ ]  | [ ]  | [ ]  |
| **Dependability /Reliability** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Accepts Responsibility** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Judgment / CommonSense**  | [ ]  | [ ]  | [ ]  | [ ]  |
| **Accepts ConstructiveCriticism** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Leadership** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Ability to think Creatively** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Fitness for a Career in Athletic Training** | [ ]  | [ ]  | [ ]  | [ ]  |
| **Earnestness about a Career in Athletic Training** | [ ]  | [ ]  | [ ]  | [ ]  |

Has the candidate had any academic, emotional, or disciplinary problems, which might impede his/her pursuit of athletic training? [ ] Yes [ ]  No If “Yes,” please explain:

 **PRECEPTOR RECOMMENDATION**

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Please comment on the applicant’s abilities as an athletic training student as well as his/her qualifications to carry on advanced study in his/her chosen field. Specifically address the applicant’s assets, liabilities, and potential capabilities for a career as an athletic trainer, and why you feel this applicant is more worthy of this scholarship than other students currently enrolled in an AT Program. **You may attach a letter of support or fill in the area below.**

Name:       Date:

Title:     Place of Employment:

 Email:      Phone:      BOC Certification #:       NATA Membership #:

**Please email or fax this form to: Reese Barber at** **reese.barber@castleton.edu** **(fax: 802-468-2189)**

***\* Please keep a copy of all materials before mailing and keep them on file in case this application is lost.***

**THE VERMONT ASSOCIATION OF ATHLETIC TRAINERSUNDERGRADUATE SCHOLARSHIP PROGRAM**

**Academic Progression and Transcript Verification Form**

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**\*Chair or Program Director: After posting of fall grades, please email or fax this form along with an official or unofficial transcript that verifies GPA and Athletic Training specific coursework to: Reese Barber at** **reese.barber@castleton.edu** **(fax: 802-468-2189).**

Student’s Name:       Last, First Middle

Institution:

**ACADEMIC PROGRESS**

Degree Program:      Major:      Minor:      Hours required for Graduation:       Hours Completed for Graduation:      Expected Completion Date:      Cumulative Grade Point Average at Certifying Institution:      (Please attach official or unofficial transcript) (Based on a 4.0 maximum)

Name:      *Indicate one* *[ ]  Chair* *[ ]  Program Director*
Date:
By submitting this form you are providing an electronic signature that is providing the same permissions as a signed original. Please initial here to verify you have read and agree to this statement: \_\_\_\_\_\_\_\_