Athletic Training Program

Dear Prospective Athletic Training Student,

Thank you for your interest in CAATE Accredited Athletic Training Program at TCU. Athletic Training is a health profession that encompasses the treatment, management, and rehabilitation of physically active individuals.

The AT Program is housed within the Department of Kinesiology and the Harris College of Nursing and Health Sciences. The athletic training degree requires 124 hours of didactic coursework as well as hands-on clinical education classes. These courses, along with the varied clinical education experiences available through both on and off-campus clinical sites, are in place to prepare the student to be successful on the BOC® exam and produce competent and confident athletic trainers.

The TCU Athletic Training Program has a secondary selective admissions process. In order to be considered for Fall admission, applications must be postmarked by March 1, 2019. Applicants selected for admission will be notified by email. Applicants must accept the position by April 15, 2019. Admission is competitive and submission of materials does not guarantee admittance to the program. Acceptance is contingent on acceptance to TCU. Due to the transition of Athletic Training Programs to the graduate level, TCU will not accept undergraduate students to the program after the Fall of 2019. Graduate students will be accepted beginning in the Summer of 2021.

Application Checklist

☐ Completed Athletic Training Program Application (including essay questions)

☐ 2 letters of recommendation

☐ Copy of all academic transcripts (High School and College, if applicable); A minimum high school GPA of 2.75 is required

☐ Interview (On campus interviews are preferred but phone interviews will be available for those students unable to travel)

Applicants are judged based on GPA, extracurricular activities, strength of letters of recommendation, strength of essay responses, and interview. Previous experience as an Athletic Training Student is not required.

☐ Please submit completed application and supplemental materials to:

Dr. Stephanie Jevas-Roegels
Athletic Training Program Director
TCU
Department of Kinesiology
TCU Box 297730
Fort Worth, TX 76129

For questions regarding the application process, please call Dr. Jevas at 817-257-5733 or email her at s.jevas@tcu.edu
Athletic Training Program
Application for Admission

Personal Information
Name ________________________________
Current Address: ________________________________
City: __________________________ State: ___________ Zip: ___________
Home Phone Number: ( ) - ___________ Cell Phone Number: ( ) - ___________
E-mail address: ________________________________ Birthday: ___________

Mailing Address: ________________________________
City: __________________________ State: ___________ Zip: ___________
Emergency Contact: __________________________ Phone Number: __________________________

Education
High School Attended: ________________________________
Date of Graduation: ___________ Grade Point Average: ___________ Class Rank: ___________
Composite Test Scores: ACT: ___________ SAT: Verbal: ___________ Math: ___________
High School Athletic Training Experience: Yes / No If yes, # of Years: ___________
Sports Assignments: ____________________________________ Year: ___________
_________________________________________ Year: ___________
_________________________________________ Year: ___________
Supervising H.S. Athletic Trainer: ________________________________
Phone Number: ( ) - __________________________ E-mail address: __________________________

For Transfer Students Only: ________________________________
College and / or University Attended: ________________________________
Dates of Attendance: ___________ Credit Hours Completed: _______ Cumulative GPA: ___________
College Athletic Training Experience: No Experience: ___________ # of Years: ___________
Sports Assignments: ___________________________ Sem / Yr: _________ # Hours: _________
_________________________________________ Sem / Yr: _________ # Hours: _________
Supervising College Athletic Trainer: ________________________________
Phone Number: ( ) - __________________________ E-mail address: __________________________
Coursework: (Please list any high school or college athletic training coursework you have completed)

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<th>Course Name</th>
<th>Grade</th>
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Other Athletic Training Experience: (Please list any athletic training workshops, camps, clinics you have attended)


Extracurricular Activities:


Other Information:
Do you expect to make athletic training your primary field of professional endeavor? If no, please explain. (Answering no to this question will not hinder your acceptance into the AT Program)

List any extracurricular activities in which you intend to participate in at TCU on regular basis (sorority, fraternity, other student organizations, etc):

Have you been accepted to TCU? ☐ Yes ☐ No
If no, please explain your current status (i.e. waitlisted, have not applied, etc.)

Essay Questions: (Please answer the following questions on a separate sheet of paper. Your responses will be evaluated on both content and grammar)

1. In your own words, describe Athletic Training.

2. What are your goals and aspirations in Athletic Training?

3. What attracted you to TCU and the Athletic Training Program?

4. What or who in your life has influenced your choice to become an Athletic Trainer?