

Connecticut Athletic Trainers' Association Undergraduate Scholarship Common Application

The **Connecticut Athletic Trainers' Association** awards 3 undergraduate scholarships: the **CATA Kathy Pirog Scholarship** (\$1,000), the **CATA Carl Krein Scholarship** (\$1,000) , and the **CATA Penny F. Dunker-Polek Scholarship** (\$1,000). An additional scholarship is awarded by District 1: the **District 1 Cathy Horne Scholarship** (\$2,500). Finally, there are two additional scholarships awarded: the **Select Physical Therapy CATA Scholarship**, and the **Elite Sports Medicine/Connecticut Children's Medical Center Dr. & Mrs. Paul A. Sirop Scholarship**. Award recipients are chosen by the CATA Executive Council in conjunction with the CATA Research and Education Committee. This application will make you eligible for all of the above scholarships except the **CATA Penny F. Dunker-Polek Scholarship**, which has a separate application.

Eligibility Requirements:

- Applicant must be a full-time undergraduate student enrolled in an accredited Athletic Training Education Program in Connecticut.
- Applicant must be a student member of the NATA and CATA. Out of state students enrolled in an Athletic Training program in Connecticut should change their permanent address to their Connecticut mailing address on the NATA website to make the student a member of the CATA.
- Applicant must distinguish oneself academically, and as a participant in his/her athletic training program
- Applicant may apply during his/her junior year, or immediately prior to his/her final undergraduate academic year (including 5th year)
- Applicant must confirm his/her intent to pursue the athletic training profession, that the money will be used for educational purposes only, and their NPI number.

Nomination Instructions:

Each certified athletic trainer may submit no more than one nomination.

The following items must be submitted:

1. The student application form completed and signed by the nominee
2. A letter of recommendation to be completed and signed by a certified athletic trainer.
3. Nomination form signed by the undergraduate Program Director or Department Head
4. Undergraduate official transcript
5. Copy of your NATA membership card

The deadline for filing applications is April 1st. Application packets must be postmarked no later than April 1st for consideration. Submit to:

Julie Nolan, PhD, LAT, ATC
Assistant Professor
Athletic Training Education Program
Sacred Heart University
nolanj5@sacredheart.edu

**Connecticut Athletic Trainers' Association
Undergraduate Scholarship Common Application**

Undergraduate Student Scholarship Application

Name _____ Date _____
(last) (first) (middle)

College or University _____

School Address _____
(street) (city) (state) (zip)

Home Address _____
(street) (city) (state) (zip)

Cell Phone _____ School Phone _____

Current Class Standing: Junior _____ Senior _____ Email _____

Major _____ Minor _____

Are you currently completing clinical experiences as an athletic training student? Yes ___ No ___

How many hours of athletic training experience have you gained under a certified athletic trainer? _____ Who is your supervising athletic trainer? _____

How many semesters of clinical experience have you had as an athletic training student? _____

Are you currently a member of the NATA? Yes ___ No ___ If yes, member # _____

How many years have you been a NATA member? _____

Are you currently planning to make athletic training your primary field of professional endeavor after graduation? Yes ___ No ___

Do you have a NPI number? Yes ___ No ___ If yes, NPI # _____

I hereby confirm that all of the foregoing information is true and correct. I also attest that the scholarship money awarded to me will be used for education (tuition, books, etc) purposes only.

Applicant's signature: _____ Date: _____

**Connecticut Athletic Trainers' Association
Undergraduate Scholarship Common Application**

ACTIVITY PARTICIPATION

Describe any activities in which you participate (organizations, clubs, class offices, etc.)

List any experience you have had in athletic training.

List any academic awards or special recognitions you have received.

**Connecticut Athletic Trainers' Association
Undergraduate Scholarship Common Application**

CERTIFIED ATHLETIC TRAINING SUPERVISOR RECOMMENDATION

Name of applicant _____
(last) (first) (middle)

Signed _____ Date _____
Athletic Trainer

BOC Certification # _____

State License # _____

Connecticut Athletic Trainers' Association
Undergraduate Scholarship Common Application

PROGRAM DIRECTOR OR HEAD OF DEPARTMENT NOMINATION FORM

Applicant's Name: _____
(Last) (First) (Middle)

Name of Institution: _____

Degree Program: _____

Major: _____ Minor: _____

Credit Hours required for Graduation: _____ Credit Hours Completed: _____

Expected Completion Date of Undergraduate Degree: _____

Cumulative overall GPA (based on a 4.0 maximum) for all undergraduate work: _____

PROGRAM DIRECTOR OR HEAD OF DEPARTMENT

Name and Title: _____

I certify that the above applicant is enrolled at our institution, and that the foregoing information is correct.

Signature: _____ Date: _____