

Undergraduate Athletic Training Program
School of Health, Physical Education and Recreation
Indiana University

Procedures of Admission

There is a limit on the number of students that can be accepted into the athletic training program. This limitation is based on the maximum number of positions available in gaining the necessary practical experience through working with the various athletic teams. To facilitate the selection process, BOC certified athletic trainers will screen all applicants and select the number of prospective students that the facilities will accommodate. The athletic training program is a tightly restricted quota program and final announcements concerning selections will not be made until approximately July 1. The procedure for applying is outlined below:

General Information

Students who desire entrance into the athletic training program and feel that they have met the entrance requirements, (see University Division or HPER School Bulletin), should complete the enclosed application forms for athletic training. All students are to complete the Sections **Academic Data-Current Semester** and **Required Courses**. All applicants should fill in the area marked **Midterm Grades**. For those students who do not receive midterm grades please estimate your expected grades under this area. The completed Athletic Training Application and midterm grades should be forwarded to the **HPER Records Office, HPER 115, Indiana University, Bloomington, IN 47405**, deadline **April 1**.

The committee for Admission to Athletic Training will review all applications and the decision on admission will be made in relation to:

- a. Career-goal interest in athletic training and other aspects of the major program
- b. Scholastic record and academic progress
- c. Previous experiences in extra curricular activities
- d. Previous experience in athletic training

If you are not admitted to the program, or decide not to pursue athletic training for other reasons, you may register for course work leading toward a Bachelor's degree in any of the programs listed in the HPER Bulletin, providing you have met entrance requirements.

Transfer Students From Another University

Students who desire entrance into the athletic training program and are transferring to Indiana University from another university should complete the enclosed application for this special program in addition to an application for admission to Indiana University.

If you should need additional information, please do not hesitate to contact the HPER Records Office, HPER 115, (812) 855-1561.

Associated Annual ATEP Fees*

Professional Liability Insurance	\$ 35.00 (Annual)
NATA Student Membership	75.00 (Annual)
Criminal History Check	7.00 (One time)
HBV Immunization (3 shots)	100.00 (One time)
Professional Attire	40.00 (Annual)

*For students accepted to ATEP

Note: Fees are approximate and may change.

On a separate sheet of paper, please prepare and attach carefully written statements to the following sections. List questions 1 through 5 and provide answers in 50-100 words per questions.

Section I

1. What influenced you to consider athletic training as a major?
2. List extra-curricular activities (varsity sports participation, speech club, etc.).
3. List any awards you have received other than athletic awards.
4. What athletic training experiences have you had? (What sports? – estimated hours spent in this experience).
5. List adjunct experiences (hospital aide, team manager, workshops, clinics attended).

Section II

Provide a carefully written account of your personal background in 250-500 words. This statement should provide a picture of you as a total person. Information on your education, practical experience and special interests, particularly as these pertain to your interest in athletic training as a profession, should be included. Also comment on your long range academic and career objectives.

List below the names and addresses of three individuals who you have asked to complete the enclosed recommendation forms. Please have your completed recommendation forms mailed to: *HPER Records Office, Undergraduate Recorder, HPER 115, Indiana University, Bloomington, IN 47405.*

1. _____
2. _____
3. _____

PLEASE TYPE OR PRINT LEGIBLY

APPLICANT Please complete this section.

Applicant _____ Undergraduate Degree Sought _____
 Last Name First Name M

The Family Education and Privacy Act of 1974 opens many student records for the student's inspection. The law also permits the student to sign a waiver relinquishing one's rights to inspect letters of recommendation. The applicant's signature below indicates the student's choice.

I hereby waive my right of access to the information recorded below. OR I do not waive my right of access to the information recorded below.

Signature of applicant _____ Date _____ Signature of applicant _____ Date _____

TO THE RECOMMENDER Please complete items 1-4.

Waiver Under the provisions of the Family Educational Rights Act of 1974, this applicant (if admitted and enrolled) will have access to the information provided unless such access has been waived.

Specific Comments *After responding to the items below, please comment specifically on the applicant's strengths and limitations on the other side of this form or attach a letter.* Descriptions of significant actions, accomplishments, and personal qualities related to scholarly achievement would be particularly helpful as would be information concerning the applicant's academic capabilities and your estimate of the applicant's potential as a candidate for the Undergraduate Athletic Training Program.

1. How long and in what capacity have you known the applicant?

2. Please rate the applicant in the section below. These ratings should complement your specific comments, not replace them.

	Truly Exceptional (Top 1%)	Outstanding (Top 5%)	Excellent (Top 10%)	Very Good (Top 25%)	Above Average (Top 50%)	Below Average (Lower 50%)	Unable to Comment
Academic potential							
Ability to manage time							
Communication skills							
Creativity & originality							
Reliability							
Ability to work with others; people skills							
Maintains a balance between extra curricular activities & academic endeavors							
Ability to work independently							
Motivation for Athletic Training							
Punctuality							
Organizational skills							

3. Please indicate the strength of your overall endorsement by placing an "X" along the following scale:

Highly recommended Recommended Recommended w/some reservations Not recommended

4. Detailed comments and recommendations.

Mail the completed form to: Records Office, HPER 115, School of HPER, Indiana University, Bloomington, IN 47405

Name (please print or type) _____ Date _____

Position or Title _____

Address _____

Signature _____

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Athletic Training Education Program Technical Standards for Admission

The Athletic Training Educational Program at Indiana University is a rigorous and intense program that places specific requirements and demands on the students enrolled in the program. An objective of this program is 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 technical standards set forth by the Athletic Training Educational Program establish the essential qualities considered necessary for students admitted to this program to achieve the knowledge, skills, and competencies of an entry-level athletic trainer, as well as meet the expectations of the program's accrediting agency (Commission on Accreditation of Athletic Training Education [CAATE]). All students admitted to the Athletic Training Educational Program must meet the following abilities and expectations. In the event a student is unable to fulfill these technical standards, with or without reasonable accommodation, the student will not be admitted into the program.

Compliance with the program's technical standards does not guarantee a student's eligibility for the BOC certification exam.

Candidates for selection to the Athletic Training Educational Program must demonstrate:

1. The mental capacity to assimilate, analyze, synthesize, integrate concepts and problem solve to formulate assessment and therapeutic judgments and to be able to distinguish deviations from the norm;
2. Sufficient postural and neuromuscular control, sensory function, and coordination to perform appropriate physical examinations using accepted techniques; and accurately, safely and efficiently use equipment and materials during the assessment and treatment of patients;
3. The ability to communicate effectively and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds; this includes, but is not limited to, the ability to establish rapport with patients and communicate judgments and treatment information effectively. Students must be able to understand and speak the English language at a level consistent with competent professional practice;
4. The ability to record the physical examination results and a treatment plan clearly and accurately;
5. The capacity to maintain composure and continue to function well during periods of high stress;
6. The perseverance, diligence and commitment to complete the athletic training education program as outlined and sequenced;
7. Flexibility and the ability to adjust to changing situations and uncertainty in clinical situations;
8. Affective skills and appropriate demeanor and rapport that relate to professional education and quality patient care.

Candidates for selection to the athletic training educational program will be required to verify they understand and meet these technical standards or that they believe that, with certain accommodations, they can meet the standards.

The Student Disability Services Department will evaluate a student who states he/she could meet the program's technical standards with accommodation and confirm that the stated condition qualifies as a disability under applicable laws.

If a student states he/she can meet the technical standards with accommodation, then the University will determine whether it agrees that the student can meet the technical standards with reasonable

accommodation; this includes a review and whether the accommodations requested are reasonable, taking into account whether accommodation would jeopardize clinician/patient safety, or the educational process of the student or the institution, including all coursework, clinical experiences and internships deemed essential to graduation.

I certify that I have read and understand the technical standards for selection listed above, and I believe to the best of my knowledge that I meet each of these standards without accommodation. I understand that if I am unable to meet these standards, I will not be admitted into the program.

Signature of Applicant

Date

Alternative statement for students requesting accommodations:

I certify that I have read and understand the technical standards of selection listed above and I believe to the best of my knowledge that I can meet each of these standards with certain accommodations. I will contact the Student Disability Services Department to determine what accommodations may be available. I understand that if I am unable to meet these standards with or without accommodations, I will not be admitted into the program.

Signature of Applicant

Date

P 280 - Principles of Athletic Training and Emergency Care

Athletic Training Observation Experience (“Buddy Program”) Objectives and Directions for Participation

Objectives:

- To expose intended athletic training majors * to the daily routine, duties and qualifications of certified athletic trainers in a collegiate environment.
- To expose intended athletic training majors* to the time and skill requirements of clinical education for those athletic training majors accepted into the program.
- To develop basic competency in selected, basic athletic training skills.
- The Athletic Training Education Program (ATEP) is a competitive program in which students must be admitted. **Completion of the P280 Athletic Training Observation Experience or other approved athletic training observation is required prior to application to ATEP.** Any student demonstrating interest in applying to the ATEP should complete this observation experience while enrolled in P280 (see attached P280 AT Observation Experience Requirements) and **submit copies of Forms A & B with your ATEP application** (see attached forms).

Please contact instructor for details on seeking approval of a different observation experience.

Directions for Participation (*AT Majors only*):

1. P280 Students will be assigned a “buddy” in the ATEP.
2. P280 students should contact their buddy within the first 3 weeks of classes to make arrangements for observation during ATEP clinical education.
3. P280 students should observe their buddy a minimum of **12 hours** over the course of 3 days of clinical education (pre-practice through post-practice). This will be approximately 4 hours per observation session.
 - a. P280 students may arrange to observe on more frequent occasions for less time if their schedule does not permit a four hour observation in one day. Specific arrangements should be made with the P280 buddy. Please immediately contact Dr. Klossner @ jklossne@indiana.edu if the assigned buddy can not accommodate this scheduling request.

(continued)

- b. For scheduling purposes, students are asked to make arrangements to observe their buddy a minimum of **once each month for 3 months if at all possible** (i.e. Sept, Oct, Nov or Feb, Mar, April).
 - i. P 280 students should plan accordingly with their buddy. Please contact your buddy in advance if you need to reschedule.
 - ii. All observation experiences during the spring semester should be completed (and signed by P280 buddy) prior to ATEP interviews.
4. The Basic Athletic Training Proficiency Skills (See Form B) may be practiced with your P280 Buddy. Please turn in the original with your application to ATEP. Retain a copy for your files.
5. Students are strongly encouraged to complete the P280 Athletic Training Observation Experience Feedback Form (Form C) upon conclusion of the observation experience. These should be turned in to your P280 instructor or mailed to the name and address listed on the form.
6. All forms may be found on On-Course if additional copies are needed.
7. **Students must follow the required dress code.** This dress code includes: Khaki pants or black dress pants, closed-toed shoes, and a white polo-style shirt (plain white or with a small Indiana logo are the only acceptable options). Students should try to avoid wearing clothing with any logo other than the Adidas logo if at all possible. Clean tennis shoes are acceptable. No hats or excessive jewelry. **You will be sent home if you do not meet the required dress code.** Students should discuss acceptable clothing options for outdoor practice observation with their P280 Buddy.

**P 280 - Athletic Training Observation Experience
Hour Verification - Form A**

Name: _____
Semester P280 Taken: _____ **Instructor:** _____
Assigned ATEP Buddy: _____

PART I:

Directions: Please fill in the days, time and setting or sport in which you observed. Please have your buddy sign your form at the end of each observation. Please try to observe once each month in February, March & April.

DATE	START TIME	END TIME	SETTING/ SPORT	ATEP BUDDY SIGNATURE

PART 2:

Directions: Please list any questions you have about becoming an athletic trainer or the athletic training education program. Please ask your buddy these questions and describe his / her response(s). You may use the back of this paper if needed.

Please submit completed form with ATEP application. Maintain a copy for your files.

**P 280 - Athletic Training Observation Experience
Basic Athletic Training Skills - Form B**

Name: _____
Semester P280 Taken: _____ Instructor: _____
Assigned ATEP Buddy: _____

Directions:

- You should review and practice the following basic athletic training skills. These may be learned with your P280 buddy or others within the ATEP program willing to assist you.
- Please have your buddy sign off after you learn and demonstrate each skill.
- Please bring attached skill sheets to each of your observation experiences.
- Please turn in a copy of this form with your ATEP application. Retain a copy for your files.

BASIC ATHLETIC TRAINING SKILLS

SKILL	DATE DEMONSTRATED	ATEP BUDDY SIGNATURE	COMMENTS
Crutch Walking			
Ice Bag; Compression Wrap			
Basic Wound Care / Universal Precautions			
Use & Interpret Weight Charts			
Sling Psychrometer			
Lightening Precautions			
Vital Signs (BP, pulse, respirations, temperature)			
Height			
Snellen Eye Chart			

Please list any other skills practiced with your ATEP buddy (if any):

Please submit completed form with ATEP application. Maintain a copy for your files.

