

**Greensboro College
Athletic Training Education Program
Application Process**

1. Applications to the ATEP are due April 25th, 2008 or August 1st, 2008.
2. To apply to the program:
 - a. Must have a "C-" or better in the following courses:
KIN 1100 Personal Fitness/Wellness
ATH 1150 Basic Skills in AT
ATH 1100 Prev. and Care of Emergencies and Athletic Injuries
BIO 1100 General Biology I with Lab or BIO 1300 General Biology I with Lab for majors
 - c. Cumulative GPA of 2.5
 - d. Completion of 45 hours of observation under a Certified Athletic Trainer
 - d. Completion of First Year Observation Skills (or skills test)
 - e. Letter of recommendation from faculty/staff member at Greensboro College (transfer students may have a letter of recommendation from supervising ATC)
3. As part of the application process, you must submit:
Immunization records
Physical Examination verifying you have the ability to meet the Technical Standards (*with or without accommodations*)
3. Once the application is complete, interviews will be scheduled
4. The interview will be conducted by the Program Director, Clinical Coordinator, AT Staff Member(s) and an upper level AT student.
 - a. Schedule a time for the interview
 - b. Arrive to the interview on time
 - c. Dress professionally for the interview
 - d. Interviews will be video recorded
5. Once final grades are confirmed, letters (denied, accepted on probation, full acceptance) will be mailed to your home. At that time, you will be sent a "confirmation" packet that includes:
 - a. Verification of Liability insurance information (required annually)
 - b. Copy of CPR certification (required annually)
 - c. Copy of NATA Membership card (required annually)
 - d. Verification of Change in Technical Standards
6. The confirmation packet must be mailed back to the Program Director by the specified date or admittance to the program may be denied.

**Athletic Training Education Program
Recommendation for Program Acceptance
(To be completed by Greensboro College Faculty or Staff Member)**

A. Student's Name:

B. Rating:

	Out Standing Top 5-10%	Excellent Top 25%	Good Top 40%	Needs Improvement	Unable to Judge
Initiative					
Persistence					
Independence					
Responsibility					
Reliability					
Judgment					
Leadership					
Ability to communicate					
Professionalism					
Ability to work with; relate to others					
Ability to think creatively					
Ability to complete tasks when assigned					

C. In separate letter, please support your ratings in section B.

Submitted by:

Name: _____

Title: _____

Signature: _____

*Please return the form and accompanying letter of recommendation to the student in a sealed envelope with your signature across the seal.

Physical Examination
To Be Completed By The Physician

Physical Examination

Height: _____ Weight: _____

Pulse: _____ Blood Pressure: _____

Thyroid: _____

History of Hernia: _____

Back injury or surgery: _____

Weight or activity restrictions? Yes _____ No _____ If yes, please specify the nature of the restrictions _____

Has applicant any handicaps? State nature _____

Normal	Abnormal		(Explain abnormal findings)
_____	_____	Eyes	_____
_____	_____	Ears, Nose, Throat	_____
_____	_____	Heart	_____
_____	_____	Lungs	_____
_____	_____	Abdomen	_____
_____	_____	Neck	_____
_____	_____	Extremities	_____

I have this day given (name) _____
a careful physical examination and found her (him) in _____
health.

After this examination, do you believe that the health history and physical examination justify
Name _____
undertaking the Athletic Training Program? YES NO SEE BELOW

Does this individual meet the technical standards of the program? YES NO

If NO, what are this individual's limitations? _____

**Physical Examination, cont.
To Be Completed By The Physician**

If NO, can this individual meet the technical standards of the program with accommodations? YES NO

If you feel that the individual can meet the technical standards with accommodations, what accommodations do you recommend? _____

If the above section is completed, the individual must complete the attached form from the Office of Disability Services.

Comments/Remarks _____

Signature _____ **M.D. Date** _____

**Greensboro College
Athletic Training Education Program**

**Office of Disability Services
Technical Standards Accommodations**

Name _____ **Date** _____

Accommodations listed by the Physician:

Can these accommodations be met? If yes, how? If NO, is there any recommendations that can be made?

Signature of Director of Disability Services

Date

Technical Standards, Essential Eligibility Requirements and Essential Program Requirements of Athletic Training Education Program at Greensboro College

A Bachelor of Science Degree with a major in Athletic Training signifies that the student is eligible to sit for the Board of Certification. Inc. (BOC) Examination, and verifies that the holder is prepared for entry into the profession of Athletic Training. A degree also verifies that the students have the knowledge and skills to function in a variety of settings, including clinical settings. The following abilities and expectations are to be met by each student admitted to the Athletic Training Education Program at Greensboro College. These expectations can be met with or without accommodations.

Critical Thinking Ability

Students will be required to have critical thinking ability sufficient for clinical judgment; sufficient powers of intellect to acquire, assimilate, integrate, apply and evaluate information and solve problems. Interpersonal abilities sufficient to interact with:

1. Individuals
2. Families
3. Groups

The above-mentioned may come from a variety of social, emotional, cultural, economic and intellectual backgrounds. Communication abilities sufficient for interaction with others in verbal and written form. Utilizes effective communication skills to interact with patient/client, peers and other health care personnel of various ages, cultural, economic and intellectual backgrounds in a variety of settings. Identify cause-effect relationships in clinical situations, develop and implement athletic training care plans & respond, without delay, to emergency situations. Establish rapport with patients/clients, colleagues and other health care personnel.

Physical Abilities

1. Students will be required to have physical abilities sufficient to move from room to room, athletic sidelines to athletic playing field, lift and position, maneuver in small places, and physical health and stamina needed to carry out athletic training procedures.
2. Ability to get self to clinical sites.
3. Explain treatment procedures, initiate health teaching to individual clients, document and interpret athletic training actions and patient/client responses.
4. Communicate information accurately and effectively with other departments/colleagues, client/families.
5. Evaluate written orders, care plans and treatment requests.
6. Move around in the athletic training room, workspaces and treatment areas & the ability to administer cardiopulmonary resuscitation.
7. Student must be able to function in diverse weather conditions (i.e. rain, snow, hot and humid days)

Motor Skills

1. Gross and fine motor abilities sufficient to provide safe and effective athletic training care.
2. Lift, move, position and transport patients without causing harm, undue pain, and discomfort to the patient or one's self.
3. Transport mobile equipment in timely and cautious manner.
4. Calibrate, use and manipulate equipment properly; position patients/clients, manipulate computer, tape and wrap bandages; maintain sterility of equipment.

Sensory

1. Sufficient use of senses of vision, hearing, touch, and smell. To observe, assess and evaluate effectively (both close at hand and at a distance) in the classroom, laboratory and clinical setting.
2. Hear emergency signals, auscultatory sounds, cries for help; perform visual assessments on patients/clients.
3. Observe patient/client responses; perform palpation, functions of physical examination and/or those related to therapeutic intervention.

Behavioral

1. Sufficient motivation, responsibility, and flexibility to function in new and ever-changing and stressful environments.
2. Adapts appropriately to ever changing needs of clients and/or families.
3. Adapts to assignment of patient and/or clinical/lab area in a manner that allows the students to meet objectives while providing safe, adequate patient care.
4. Accountable for clinical preparation and independent study and performs athletic training functions in a safe responsible manner.
5. Ability to recognize the need for further research and respond accordingly based on changes in patient/client status.

"On an individual basis, students with disabilities who are otherwise qualified may request the use of assistive technology that would enable them to meet the above requirements"