# SOUTHWESTERN COLLEGE
## Athletic Training Program Application
***(Please Type or Print)***

### Personal Information

Full Name:_____ Date of Birth:_____
Last First Middle month/day/year

Home Address:_____ Phone: _(____)_____
Street Number City State Zip

Present Address:_____ E-mail:_____
Street Number City State Zip

### Academic Information

***Current Students Overall GPA:***_____
**PESS230 Introduction to Athletic Training Grade**____
**PESS126 First Aid & Safety (Current Grade)**___
**BIOL 111 Biology 1: The Unity Of Life** ____

***Transfer Students Overall GPA***_____
**Basic Athletic Training Course Grade**____
**Basic First Aid/CPR Course Grade**____
**Biology 1: Course Grade**____

High School:_____ Graduation Date:_____

Dates of Attendance:_____ GPA:_____ ACT:_____

High School Honors:_____

Other College/University Attended:_____ GPA:_____

Dates of Attendance:_____ Degree:_____

Do you plan on making Athletic Training your professional career? If not, then what?

---

Do you have any other outside experience that you feel is pertinent for your application?

---

Please list extracurricular activities in which you are involved.

---

Please list one faculty reference:_____
Full Name Title/Department Phone #

**On the back of this application please explain why you desire to be accepted into the athletic training curriculum and what your future plans are after graduation.**

I certify that the above information is true and correct to the best of my knowledge. I understand that falsified information may lead to the rejection of my application.

Applicants Signature:_____Date:_____