

Suffolk County Athletic Trainers' Association

Annual Scholarship Application

The Suffolk County Athletic Trainers' Association (SCATA) will award up to three \$1,000 scholarships to graduating high school seniors accepted into a CAATE-accredited athletic training program.

Requirements

Each award recipient must meet the follow criteria in order to be considered for one of these scholarships:

- ✓ Be a graduating senior (June 2019) from a high school in Suffolk County, New York.
- ✓ Be accepted into a CAATE-accredited athletic training program (major) to begin the Fall (2019) semester immediately after high school graduation.
 - □ Submit a copy of at least one acceptance letter from a college or university that states the student's declared major in athletic training.
- ✓ Earned a minimum high school GPA of 3.3 (87%) at time of application.
 - □ Submit a signed verification form from a school official (guidance counselor, vice principal, etc.)
- ✓ Provide a letter of recommendation from a licensed health care practitioner that addresses the student's potential as a Certified Athletic Trainer.
- ✓ Provide a 1-2 page double spaced essay answering the following questions: What experience(s) in your life have led you to pursue a career in Athletic Training? What characteristics do you possess that you could bring the profession of Athletic Training?

Important Dates

- Application Deadline: May 1^{st,} 2019
- Winners will be notified by e-mail and names will be posted on www.scatassoc.weebly.com on or before May 15th

All materials should be emailed to SCATAscholarship@gmail.com with attached documents as one PDF file no later than May 1st, 2019.

For questions or inquiries, please contact us at SCATAscholarship@gmail.com



Suffolk County Athletic Trainers' Association **Scholarship Application**

APPLICANT FULL NAME		
LAST	FIRST	MIDDLE
PERMANENT ADDRESS & CONTACT	INFORMATION	
STREET ADDRESS		
CITY	STATE	ZIP
HOME PHONE	MOBILE PHONE	EMAIL
HIGH SCHOOL		
HIGH SCHOOL NAME	HIGH SCHOOL STREET	ADDRESS
CITY	STATE	ZIP
	VERIFICATION D BY SCHOOL OFFICIAL	(Guidance Counselor, Principal, etc.)
NAME OF SCHOOL OFFICIAL		TITLE
PHONE	FAX	EMAIL
1. Applicant's Name:		Cumulative GPA
Is the student expected to grad	luate at the conclusion of	f this academic year? Yes No
3. Class Rank	Class Size	Average (percentage)
4. If your school does not use any garding the student's academic	y of the aforementioned r c standing among their cl	measurements, please provide an explanation re- lassmates in the space provided.
Signature of School Official		Date

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Scholarship Application Check List

☐ Application with verification portion signed & completed by school official.
☐ A copy of at least one acceptance letter from a college or university that states the student's declared major in Athletic Training
☐ Letter of recommendation from a licensed health care practitioner that addresses the student's potential as a Certified Athletic Trainer.
☐ A 1-2 page double spaced essay answering the following questions:
 What experience(s) in your life have led you to pursue a career in Athletic Training?
 What characteristics do you possess that you could bring the profession of Athletic Training?

All materials should be emailed to SCATAscholarship@gmail.com with attached documents as one PDF file no later than May 1st, 2019.

Applications submitted after the deadline will not be considered.

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