Marshall University College of Health Professions School of Kinesiology

Professional Master of Science in Athletic Training Program Application

Please type or print in blue ink.								
Full name				MU ID# _	-	-		_
Email (print/type in all lower case)								
Local Address					Local Phone	(_)	
Home Address					Home Phon	ie <u>(</u>)	
			_					
Current Overall GPA:		To	otal Aca	demic Hou	urs Completed: _			
Record your letter grade and date take ** <u>Attach a copy of your officion</u>			_		below highlighte	d in yel	<u>'llow.</u> **	
Semester and	Year T	aken_				Grad	l <u>e</u>	
BSC 227 Human Anatomy				Year	🗆 🗆 A	□В	_ □ C	
BSC 228 Human Physiology	□F	\Box S	□ Su	Year	□ A	□В	□ C	
DTS 210 Nutrition	□F	\Box S	□ Su	Year	🗆 🗆 A	□В	□ C	
ESS 345 Exercise Physiology	□F	\Box S	□ Su	Year	🗆 A	□В	□ C	
HS 200 Medical Terminology	□F	\Box S	□ Su	Year	🗆 A	_ □ B	□C	
HS 215 Intro to AT				Year		_ □ B	□C	
HS 220 Personal Health	□ F	□S	□ Su	Year	🗆 🗆 A	_ □ B	□C	
HS 222* *or proof of First Aid and CPR/AED certification	□ F	□S	□ Su	Year	□ A	_ □ B	□С	
HS 365 Kinesiology	□ F	\Box S	□ Su	Year	□ A	_ □ B	□ C	
PSY 101 General Psychology						□B	□ C	
Statistics	□ F	□ S	□ Su	Year	□ A	_ □ B	□ C	
Directed Observation Clinical Outcome	s and	50 Hc	ours Cor	mpleted: <u>Y</u>	<u>res/no</u>			
Are you a NATA member? Yes	No		If	so, Memb	pership #			_
I have read and will comply with the Athlo Behavior, and the dress code policy as the		_				he ATP	Policy on Prof	essional
Signature					Dat	e		
I understand that if I am accepted to the I obtaining transportation when I am assign depending upon the off-campus clinical si	ned to	off-ca	mpus cli	inical sites.	This may range fr	_		
Signature					Dat	e		

Marshall University Graduate College Admission Requirements*

- 1. Complete and submit Graduate College Application for Admission and application fee along with the following:
- 2. Letter of Application
 - a. 1-2 pages in length addressing the following elements: why you chose to complete this program; what leadership abilities you have to offer that would enhance the PMSAT program at Marshall; what observations/experiences you have obtained that would make you an asset to the PMSATP; why you should be accepted for admission to the PMSATP; also, please include future professional and academic goals after obtaining your BOC-certification (examples can be found on the internet)
- 3. Three (3) reference evaluation forms (at least two of these forms <u>must</u> be completed by full time faculty, staff, or other college/university employees)
- 4. At least one (1) typewritten character letter of recommendation.
 - a. This letter can come from any of the following individuals: University administrator, faculty, or staff member; person of your choice (i.e., high school teacher or coach, clergy member, etc.) who is not a family member (NOTE: this individual cannot also have completed a reference evaluation form)
 - b. Letter of recommendation should address the following character traits: self-confidence, leadership, integrity, initiative, communication skills, responsibility, and professionalism.
- 5. Must have official preliminary college transcripts sent directly to MU Graduate Admissions from the issuing institution. Students who have not received the bachelor's degree at the time of application, must submit official preliminary college transcripts to MU Graduate Admissions.
- * = items submitted directly to Marshall University Graduate College

PMSAT Program Requirements**

- 1. Professional Resume or Vita
- 2. Physical examination (signed by your family physician or University physician on the appropriate form) noting you have passed a physical exam and can meet the technical standards for this program. This exam must have been performed within the past 12 months of application to the ATP.
- 3. A copy of your immunization records including a negative TB (PPD) Test within the past twelve months. The TB test can be obtained at Marshall Medical for \$5.
- 4. Students must read and sign the "Hepatitis B Immunization Informed Consent/Refusal form" in the appropriate location.
- 5. Evidence of current American Heart Association or American Red Cross certification in First aid and CPR; must be either Healthcare Provider or Professional Rescuer certifications
- **6.** Certificate of Sexual Harassment Training (http://training.newmedialearning.com/psh/marshallu/choice.htm)
- 7. Certificate of Bloodborne Pathogen Training Only (http://crh.marshall.edu/bbp/)
- 8. Read "Technical Standards for Admission" document contained in this packet and sign in the appropriate location in blue ink
- 9. Read and sign the final page of the "Athletic Training Major Requirements Checklist" that is included in the application packet.

10. Students admitted to the PMSATP must provide evidence of student membership in the National Athletic Trainers' Association and maintain this membership as they matriculate through the ATP; for details go to http://www.nata.org/membership

** = items mailed to: Dr. Joseph A. Beckett, ATC

Director, Athletic Training Program

Marshall University

GH 203-E (304) 696-2929

beckett76@marshall.edu

February 15 will be the priority admission deadline for full consideration

Students with junior standing or higher must have completed the specific requirements described previously and throughout this application before they will be invited for an interview. Those applicants satisfying the minimum standards will receive official notice from the Athletic Training Program Director and be invited for an interview. The formal interview process will allow candidates the opportunity to clarify any requirements, ask questions, and demonstrate your knowledge of and dedication to the academic program and the athletic training profession.

Entry into the Professional Master of Science in Athletic Training Program involves formal application by candidates and <u>competitive</u> selection by an admissions committee. Thus, <u>admission of qualified</u> <u>applicants is not guaranteed and is competitive</u>. Applicants must achieve the minimum acceptance score of 70 points on the Marshall University PMSATP Applicant Admission Assessment form in order to be considered for acceptance.

If there are more applicants who meet this 70 point threshold than there are available slots to the PMSATP, then applicants will be rank ordered based upon their score on the Applicant Admission Assessment Form. Available slots within the PMSATP would then be filled according to this prioritized listing of candidates starting from the top score downward. Should applicants have the same score on the Applicant Admission Assessment Form, then a tie breaker will be used to further determine this rank order. The tie breaker would be based upon documented evidence provided in their application file regarding the quantity and quality of their directed observation clinical experience.

PMSATP applicants not being accepted may re-apply for admission during the next available application period. Because of the competitive nature of this admission process, it is recommended that students seeking admission to the Professional Master of Science in Athletic Training Program develop an alternative academic plan in the event they are not admitted.

If any portion of the application is dishonest or deceptive in any way the applicant will no longer be considered.

Marshall University College of Health Professions School of Kinesiology Professional Master of Science in Athletic Training Program Reference Evaluation Form

Name of Applicant	Date	
MU ID		
CONFIDENTIAL RECOMMENDA	TION	
1974, students are given the ri we shall consider all letters of written in confidence are of gr promise. We invite you, therefor however, expressly decline to 1. I expressly waive any rights	I might have to access to the letter of reco	rs of recommendation. While in many instances letters nt's qualifications, abilities, and wing waiver (1): you may ommendation under the Family
-	acy Act of 1974 or any other law, regulation	
Date	Signature Print Name	
2. I do not agree to the waive	above	
Date	Signature	
	Print Name	

Name _____ Date _____ Daytime Phone # (________

Please rank the applicant from 1-5, with 1 be	ing the low	est and	5 being	g the hig	ghest. N	I/A = not applicable
or no opportunity to observe						
Professionalism	1	2	3	4	5	N/A
Punctuality	1	2	3	4	5	N/A
Enthusiasm	1	2	3	4	5	N/A
Verbal Communication	1	2	3	4	5	N/A
Written Communication	1	2	3	4	5	N/A
Responsibility/Dependability	1	2	3	4	5	N/A
Health and Vitality	1	2	3	4	5	N/A
Time management	1	2	3	4	5	N/A
Accepts constructive criticism/feedback	1	2	3	4	5	N/A
Honesty/Integrity	1	2	3	4	5	N/A
Perseverance	1	2	3	4	5	N/A
Maturity	1	2	3	4	5	N/A
Multitasking ability	1	2	3	4	5	N/A
Rapport with other students	1	2	3	4	5	N/A
Rapport with faculty/staff	1	2	3	4	5	N/A
Leadership Potential	1	2	3	4	5	N/A
Knowledge of the AT Profession	1	2	3	4	5	N/A
Academic Preparation	1	2	3	4	5	N/A
Emotional stability	1	2	3	4	5	N/A
Creativity	1	2	3	4	5	N/A

How long have you known the applicant?

What do you perceive as this applicant's best qualities?

Other comments relative to this applicant:

Return in sealed envelope to:

Marshall University College of Health Professions School of Kinesiology Professional Master of Science in Athletic Training Program

Name of Applicant	Date
MU ID	

Reference Evaluation Form

CONFIDENTIAL RECOMMENDATION

To the applicant: Under the Federal law entitled the Family Educational Rights and Privacy act of 1974, students are given the right to inspect their records, including letters of recommendation. While we shall consider all letters of recommendation carefully, we believe that in many instances letters written in confidence are of greater utility in the assessment of the student's qualifications, abilities, and promise.

We invite you, therefore, but do not require you, to sign the following waiver (1): you may however, expressly decline to do so (2).

3.		nt have to access to the letter of re ct of 1974 or any other law, regulat	•
	Date	Signature	
		Print Name	
4.	I do not agree to the waiver above	e	
	Date	Signature	
		Print Name	
	•	person recommending the above can	
	me		
Em	ployer	Daytime Pho	one # <u>() - </u>

Please rank the applicant from 1-5, with 1 bei	ng the low	est and	l 5 being	g the hig	ghest. N	I/A = not applicable
or no opportunity to observe						•
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Date	Signature
	Print Name
6. I do not agree to the waive	er above
Date	Signature
	Print Name
•	by the person recommending the above candidate.
Name	Date

Employer _____

Daytime Phone # (_________

Please rank the applicant from 1-5, with 1 be	ing the low	est and	5 being	g the hig	ghest. N	I/A = not applicable
or no opportunity to observe						
Professionalism	1	2	3	4	5	N/A
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Name of Applicant	Date
MU ID	

Reference Evaluation Form

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ho	We invite you, therefore, bu wever, expressly decline to do so	• • • •	sign the following waiver (1): you may					
7.	I expressly waive any rights I might have to access to the letter of recommendation under the Family Educational Rights and Privacy Act of 1974 or any other law, regulation, or policy.							
	Date	Signature						
		Print Name						
8.	I do not agree to the waiver abo	ve						
	Date	Signature						
		Print Name						
	low this line is to be filled out by the	-	he above candidate.					
	me		Date					
Em	ployer		Daytime Phone # ()					

Please rank the applicant from 1-5, with 1 bei	ng the low	est and	l 5 being	g the hig	ghest. N	I/A = not applicable
or no opportunity to observe						•
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How long have you known the applicant?

What do you perceive as this applicant's best qualities?

Other comments relative to this applicant:

Return in sealed envelope to:

MARSHALL UNIVERSITY PROFESSIONAL MASTER OF SCIENCE IN ATHLETIC TRAINING PROGRAM TECHNICAL STANDARDS FOR ADMISSION

The Professional Master of Science in Athletic Training Program (PMSATP) at Marshall 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 patients. The technical standards establish the essential qualities considered necessary for students admitted to this program to achieve the knowledge, skills, and competencies of an professional-level athletic trainer, as well as meet the expectations of the accrediting agency of athletic training education, the Commission on Accreditation of Athletic Training Education (CAATE), in addition to state regulations. The following must be attainable by all students admitted to the PMSATP.

Compliance with the program's technical standards does not guarantee a student will successfully complete the program and meet degree requirements nor achieve a passing score on the BOC (Board of Certification) examination or to become licensed as an athletic trainer in any states the student seeks licensure or certification.

The following must be demonstrated for a student to participate in the educational program:

- Assimilate, analyze, and synthesize information; integrate concepts and problem solve; and formulate appropriate therapeutic judgments while distinguishing deviations from the norm.
- Read patient (athlete) charts, instructions related to the use of all equipment and supplies, and instrument panels and print outs generated by various pieces of equipment (i.e., isokinetic therapy equipment).
- Detect the presence of various bodily fluids, ascertain the presence of biological abnormalities according to visual cues (i.e., erythema {redness}), and differentiate various topical applications.
- Read, write, and communicate in the English language to facilitate effective communication including
 assessments and providing treatment information to patients (athletes), physicians, clinical staff, peers, and
 others charged with patient care functions. Candidates must also demonstrate the ability to communicate
 with individuals of diverse cultural and social origins and establish levels of rapport consistent with competent
 professional practice.
- Be able to verbally communicate effectively and appropriately and discern instrument alert signals and timing devices.
- Demonstrate competency in areas including, but not limited to: emergency management (i.e. rescue breathing, CPR, and airway management) and first aid techniques (i.e. wound care, splinting, patient transportation); applying supportive devices (i.e. taping, bracing, wrapping, equipment fitting); assessing joint/extremity motion, strength, and stability; application of therapeutic modalities (i.e. ultrasound and muscle stimulation equipment); and passive/active-assisted mobility/strength restoration techniques while utilizing accepted guidelines. Candidates must use equipment and supplies accurately and safely during such circumstances.
- Traverse about on-campus and to assigned affiliated site clinical settings and render assistance to patients (athletes) acutely disabled on an athletic field or court.
- Problem solve, maintain composure, and react expediently yet effectively in emergency and other stressful
 circumstances. Must be able to recognize situations and then take appropriate steps. The student must be
 able to function effectively.
- Demonstrate the perseverance, diligence, and commitment to complete the PMSATP as outlined and sequenced. This will include experiences beyond the confines of the Marshall University campus for which the student must provide their own transportation.

Candidates for selection to the PMSATP at Marshall University will be required to verify that they understand and meet these technical standards or that they believe, with certain reasonable accommodations, they can meet the standards.

The Marshall University Office of Equal Opportunity (see below) in conjunction with additional offices and departments on-campus and as appropriate, 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 a 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. Moreover, if at any time I am enrolled in the PMSATP, I become unable to meet the Technical Standards, I understand it is my responsibility to report this to the AT Program Director, so that my status can be reviewed and potential accommodations can be developed.

Signature of Applicant	 Date
Signature of Faculty Witness	 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 Marshall University Office of Disability Services (see below) 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. Moreover, if at any time I am enrolled in the PMSATP, I become unable to meet the Technical Standards, I understand it is my responsibility to report this to the AT Program Director, so that my status can be reviewed and potential accommodations can be developed.

Signature of Applicant	Date
Signature of Witness	Date

The Office of Disability Services Coordinator at Marshall University is Ms. Sandra Clements. She can be contacted at (304) 696-2271 or in her office at Prichard Hall, Room 117, Marshall University.

Marshall University is an Equal Opportunity/Affirmative Action employer and educational institution and does not discriminate on the basis of age, race, color, religion, sex, sexual orientation, disability, national origin or Vietnam era or other veteran status, in the admission to, or participation in, any educational program or activity which it conducts, or in any employment policy or practice. Any complaint arising by reason of alleged discrimination should be directed to the Office of Disability Services, Marshall University, Prichard Hall, Room 117, Huntington, WV 25755, (304) 696-2271, or the Director of the Office for Civil Rights, U.S. Department of Education, Philadelphia, PA.

PROFESSONAL MASTER OF SCIENCE IN ATHLETIC TRAINING PROGRAM REQUIREMENTS CHECKLIST

(Please make photocopy of this document for your records)

Students must read, sign and date as part of the application process during their first semester as a prospective Athletic Training major and again upon acceptance into the Professional Master of Science in Athletic Training Program (PMSATP).

I.	PROC	PROGRAM CONSIDERATION: To be considered for acceptance into the PMSATP, all students shall:					
	To be						
		A.	Meet/Contact the PMSAT Program Director or Clinical Education Coordinator during the semester prior to which application will be submitted, to indicate interest and qualifications learn about requirements and criteria for formal acceptance into the PMSATP, and provide information to start a prospective student file (NOTE: see Director of PMSATP if you are a transfer student).				
II.	STUD	ENT AP	PLICATION, SCREENING AND APPROVAL:				
			d and considered for approval into the PMSATP, all students shall make a formal application wher criteria have been met:				
		A.	Students must have completed a minimum of 90 college credits with a minimum overall grade point average of 2.75.				
	_	В.	Satisfactory completion of the following prerequisite courses (or equivalents) prior to acceptance: BSC 226 (Human Anatomy); BSC 227 (Human Physiology); DTS 210 (Nutrition) ESS 345 (Exercise Physiology); HS 200 (Medical Terminology); HS 215 (Intro to Athletic Training); HS 220 (Personal Health/Wellness); HS 222 (First Aid & CPR; or provide evidence of appropriate certifications); HS 365 (Kinesiology/Biomechanics); PSY 101 (Genera Psychology); and Statistics.				
		C.	Meet minimal acceptable level for Athletic Training competencies (cognitive, psychomotor and affective) from prerequisite courses identified above.				
		D.	Will be interviewed by the PMSATP Interview Committee to determine oral communication skills, critical thinking skills, professional attitude and attributes, and overall suitability as an Athletic Training student.				
		E.	Submits a formal typed (1-2 page minimum) letter of application indicating why he/she wants to become a Certified Athletic Trainer and explain what important contributions one will make to the Athletic Training profession in general, and specifically to the MU PMSATP.				
		F.	Complete all application forms, be screened and formally recommended (or denied) for forma approval by the PMSATP Selection Committee.				
		G.	Understand that final selections are determined on a space available basis, and individuals				

most suitable and qualified are accepted. A rubric will be used to objectively make this

decision.

III. STUDENT COMPLIANCE/EVALUATION:

IV.

	-	matriculate through the PMSATP in order to graduate with the Master of Science degree in g, and meet the Board of Certification (BOC) examination requirements all students shall:
	A.	Maintain a 3.0 cumulative GPA (NOTE: students may earn a letter grade of "C" in no more than 2 classes).
	В.	Maintain a 3.0 cumulative GPA in all clinical courses.
	C.	Meet all professional/behavioral requirements and expectations (NATA code of ethics, University code of conduct, AT standards of practice, etc.).
	D.	Meet all clinical related requirements (i.e., competencies, clinical hours, required rotations, policies and procedures, etc.).
	E.	Meet all additional requirements (maintaining first aid/CPR certifications, maintaining NATA student membership, meeting service points requirement, etc.).
	F.	Understand that failure to meet the above requirements will lead to probation and/or dismissal from the PMSATP if the offense persists. Students can appeal probation/suspension status. (NOTE: refer to "Grievance Procedure" in current copy of <i>Professional Master of Science in Athletic Training Program Policies and Procedures Manual.</i>).
	G.	Follow all policies, procedures, guidelines, etc. as stated in the current copy of the Marshall University Professional Master of Science in Athletic Training Program Policies and Procedures Manual.
CLINI	CAL EXPI	ERIENCE REQUIREMENTS:
		matriculate through the PMSATP in order to graduate with the Master of Science degree in g and to meet the BOC examination requirements all students shall:
	A.	Satisfactorily complete all Athletic Training Competencies associated with the following content areas: Evidence-Based Practice, Prevention and Health Promotion, Clinical Examination and Diagnosis, Acute Care of Injury and Illness, Therapeutic Interventions, Psychosocial Strategies and Referral, Health Care Administration, and Professional Development and Responsibility).
	B.	Accurately record and total all clinical hours and related clinical education experiences.
	C.	Satisfactorily complete all required clinical rotations.
	D.	Satisfactorily complete athletic team/patient, and Athletic Training Clinic/Sports Medicine Clinic responsibilities as assigned or required.
	E.	Meet all course/curriculum and service points requirements for graduation.
	F.	Become a student member of the National Athletic Trainers Association (NATA) once accepted into the PMSATP and maintain membership while matriculating through the PMSATP.

	G. Understand that the student bears responsibility for travel and travel-related experiences.						
V.	GRA	GRADUATION REQUIREMENTS:					
	_		with the Master of Science degree in Athletic Training and meet the BOC examination sall students shall:				
		A.	Complete each Athletic Training course with a letter grade of "B" or higher.				
		В.	Complete each Athletic Training clinical practicum course with a grade of "B" or higher.				
		C.	Complete each level of Athletic Training course with a "B" or higher prior to enrolling in a higher level course (NOTE: the exception to this requirement is for practicum courses, in which students must earn a grade of "B" or higher.)				
		D.	Achieve a minimum GPA of 3.0 on all work completed at MU.				
		E.	Complete all the required courses for the PMSATP.				
		Complete all required components of the clinical education program, including competencies and clinical hours.					
		F.	Complete the required number of service points (<u>NOTE</u> : see current copy of the <i>Marshall University PMSATP Policies and Procedures Manual</i> for details.).				
		G.	Successfully pass all competency exams administered by the PMSATP.				
VI.	STUE	DENT IN	IFORMATION:				
	requi		name and signature below indicates my understanding of, and acceptance to meet all soft the Professional Master of Science in Athletic Training Program at Marshall University as ove.				
	NAM	E	DATE				
	SIGNA	ATURE _					

In its evaluation of applicants to the Marshall University Professional Master of Science in Athletic Training Program, the PMSATP Selection Committee will interview each applicant. The questions are not designed to disqualify applicants, but rather to give the Committee more complete information about an applicant's ability to meet the non-academic standards adopted by the PMSATP. Some examples of these considerations include the following:

- 1. Is the candidate able to observe demonstrations and experiments in the basic sciences?
- 2. Is the candidate able to analyze, synthesize, solve problems, and reach diagnostic and therapeutic judgments?
- 3. Does the candidate have sufficient use of the senses of vision and hearing and the somatic sensation necessary to perform an evaluation of an injured or ill individual? Can the candidate perform palpation, auscultation, and percussion?
- 4. Can the candidate reasonably be expected to relate to a variety of patients and establish appropriate professional relationships with patients?
- 5. Can the candidate reasonably be expected to communicate the results of their evaluation to the patient and to the physician with accuracy and clarity?
- 6. Can the candidate reasonably be expected to learn and perform routine diagnostic procedures including but limited to special joint tests?
- 7. Can the candidate reasonably be expected to display good judgment in the assessment and treatment of patients?
- 8. Can the candidate reasonably be expected to perform with precise, quick, and appropriate actions in emergency situations?
- 9. Can the candidate reasonably be expected to accept constructive criticism and respond by appropriate modification of behavior?
- 10. Can the candidate reasonably be expected to possess the perseverance to complete the curriculum and enter the profession of athletic training?

When an applicant does not meet these non-academic standards as defined above, and when this would in the professional judgment of the Committee not satisfy the objectives for the student regarding patient care, education, and/or the student's personal and professional goals, the applicant may not be admitted.

Refer to the next two pages of this Professional Master of Science in Athletic Training Program application packet, to review the rubric that will be used by the Committee to evaluate applicant interviews, in addition to the types of questions that will be asked during these interviews.

Marshall University Professional Master's ATP Interview Evaluation

Student Name				Date		
Use the following so	cale and criteria.	Choose the single	best response for	r each question. Strongly	Not Applicable/	
Disagree 0	Disagree .25	Neutral .50	Agree .75	Agree 1	No basis to judge NA)
1) Student described 0	his/her personal b	ackground (i.e., famil .50	y, high school activ .75	rities, hobbies, etc 1	e.) openly and freely.	
2) Student adequately 0	described and ha	s a clear understand .50	ling of his/her profe .75	ssional aspiration 1	s for the future. NA	
3) Student provided g 0	ood reasons why l	ne/she should be acc .50	cepted into the PMS .75	SATP. 1	NA	
4) Student appears to 0	be a good manag .25	er of his/her time and .50	d could handle an i .75	ncreased time cor 1	mmitment NA	
5) Student appears to 0	be as good as or .25	better than other stu .50	dents his/her level. .75	1	NA	
6) Student has good v	verbal communicat .25	ion skills. .50	.75	1	NA	
7) Student can approp 0	oriately describe th .25	e role and responsib .50	ilities of the certifie .75	d athletic trainer to 1	o a layperson. NA	
8) Student has above 0	average leadersh .25	p skills and leadersh .50	ip ability. .75	1	NA	
9) Student can adequ 0	ately identify areas	s in which they need .50	to improve and has	s an appropriate p 1	lan to address these NA	weaknesses
10) Student participate 0	ed in an adequate .25	amount of DO expenses.50	iences to clearly ur .75	nderstand the role 1	responsibilities of th/	e ATC.
11) Student adequate 0		ly responded to scer .50		(below): 1	NA	
12) Student adequate 0	ly and appropriate .25	ly responded to scer .50	nario question .75	(below): 1	NA	
13) Student adequate 0	ly and appropriate .25	ly responded to scer .50	nario question .75	(below): 1	NA	
14) Student adequate 0	ly and appropriate .25	ly responded to scer .50	nario question .75	(below): 1	NA	
15) Student adequate 0	ly and appropriate .25	ly responded to scer .50	nario question .75	(below): 1	NA	
Evaluator Signature _				-	Total Points	<u>/ 15</u>

Scenarios

- A. Please describe a situation that you have experienced where a peer or superior asked you to do something that you were uncomfortable with. How did you handle the situation? What, if anything, would you do differently?
- B. Describe the type of people you find the most enjoyable to work with and why.
- C. What approach do you take in getting people to accept your ideas, suggestions, or goals?
- D. Describe at least one aspect of the athletic training profession that you consider a positive, and one aspect you consider as a negative, and why you feel this way.
- E. If you were the only person in the athletic training room and an athlete of the opposite sex came in with a groin injury, how would you handle the situation?
- F. What do you use as resources when you have a question regarding an AT responsibility or assignment you are unfamiliar with?
- G. What relationship do you believe should occur between the AT student and the ATC? Between the ATC and the coach? The physician?
- H. How did you become interested in the athletic training education program?
- I. What unique quality would you bring to the PMSATP?
- J. Describe what you have heard and what you believe needs to occur during your required clinical education rotations.
- H. Describe what you know about the following PMSATP policies that are discussed in the PMSATP Policies & Procedures Manual: 1) Transportation to off-campus clinical sites, 2) Uniforms, 3) the plan for clinical rotation assignment for first semester students, 4) Other policies relative to the clinical education experience.

Others?	 	

MARSHALL UNIVERSITY PROFESSIONAL MASTER OF SCIENCE IN ATHLETIC TRAINING PROGRAM DRESS & CONDUCT CODE

A professional appearance contributes enormously to the success in Athletic Training experiences. General appearance should not be a distraction to the athletic training environment. **This dress code applies to all Athletic Training classes, labs, clinical classes and clinical sites** (NOTE: clinical site may include travel with teams). Other standards may be imposed by your specific clinical site.

- All students enrolled in the Athletic Training major must wear the prescribed uniform (unless otherwise
 designated) while performing clinical rotations in any of the MU Athletic Training Clinics or involved in
 other clinical experiences on or off-campus (NOTE: for details and information please refer to the current
 copy of the PMSATP Policies and Procedures Manual). Students should expect to spend a minimum of
 \$850.00 while matriculating through the PMSATP to purchase prescribed clothing items, necessary
 personal equipment, E-value access fee, NATA student membership fee, and registration fee to take the
 BOC-certification examination. Additional costs would be incurred to pay for transportation to assigned
 clinical sites and to purchase prescribed pants or shorts.
- Tattoos or other body modifications must be covered.
- Jewelry may not be worn in any visible piercing other than in the earlobes.
- Rings, bracelets, watches, and other jewelry should be minimal and not interfere with OSHA procedures. (i.e. wearing properly fitted disposable gloves)
- Skin must be covered at the midriff when working. (i.e. reaching arms overhead, back boarding, etc.)
- No cleavage, midriff, bra (including bra strap or bra colors seen through shirt), or underwear may show.
- No tight or excessively loose clothing.
- Necklines and hemlines must be modest.
- Meticulous personal hygiene must be maintained.
- All clothing must be free of numbers, writing or screen printed designs. (excluding Athletic Training attire)
- Shirts with buttons must be worn buttoned, except for top button and tucked unless they are designed to be worn un-tucked.
- Strapless shirts are prohibited.
- Shorts should be of modest length (e.g. should not be excessively tight and no "Daisy Dukes" or short shorts shorts should be within the length of the MU ID Card from the patella)
- No open toed shoes or flip flops are permitted
- Hats or headwear are only worn for outdoor clinical settings as approved by the clinical supervisor.
- Athletic Training Program ID's worn as appropriate.
- No foul, demeaning, or derogatory language or gestures are to be used.
- No tobacco (smokeless or other) is to be used or in one's possession.
- No alcoholic beverages or illegal drugs are to be consumed (which includes on one's breath) or in one's possession.
- Cell phones and other personal electronic devices are not permitted to be used during clinical rotations and/or during classes, labs, or other organized meetings.
- Discrimination of any type will not be tolerated.