Application Materials for the Athletic Training Education Program At Western Illinois University
ADMISSION REQUIREMENTS & APPLICATION PROCESS

Western Illinois University’s ATEP will accept 18 students each semester. Each prospective student is required to apply for admission by the end of the semester in which the prerequisites will be completed. The application process is explained and discussed in both the AT 100 and AT 110 classes. The materials for application are provided to students in the AT 110 course. Students with a higher academic standing may apply and will be given equal consideration, with the understanding that they must complete the entire academic plan for their specific situation. Please be sure to meet with your academic advisor for appropriate course selections.

Students must meet the following requirements to be considered for admission into the ATEP:

1. Complete and pass AT 100.
2. Complete and pass AT 110.
3. Complete and pass Anatomy & Physiology I.
4. Provide verification of First Aid & CPR training.
5. Earn a Cumulative Grade Point Average (CGPA) of 2.50 in all coursework.
6. Earn a Grade Point Average in the Major of 2.75.
7. Complete an Academic Progress Grade Sheet.
8. Complete the ATEP Application.
9. Interview with the ATEP Review Committee.
10. Submit two WIU ATEP Reference Evaluation forms from two references.
11. Submit a one-page essay which includes an explanation as to the decision to major in athletic training at WIU.
12. Complete and pass all first year clinical competencies and proficiencies.
13. Three evaluations from WIU student mentors submitted during the clinical observation rotations as part of the AT 110 course.
14. Three evaluations from WIU Certified Athletic Trainers submitted during the clinical observation rotations as part of the AT 110 course.
15. Clinical Rotation Observation Hours (30 minimum).
The above criteria will be used for admittance into the ATEP. The ATEP Review Committee will be responsible for the selection of qualified candidates to enter the ATEP. The ATEP Review Committee is comprised of ATEP faculty, full-time Athletics ATC staff, the Kinesiology Department Academic Advisor, a student from the Department of Kinesiology, and the Kinesiology Department Chair. A rating form for admission is used to objectively measure each candidate’s admission criteria. Each admission criteria has a point value associated with it as noted on the Final Rating Form for Admission. In the event that there are more qualified applicants than can be accommodated by the program, those applicants with the highest point total will be accepted into the ATEP. In the event that there are students with the same point total, the student with the higher grade point average in all coursework will be admitted. Students will be notified, in writing, of the outcomes of their application and interview in a timely manner and will begin their athletic training experience in the following semester. Students who are not accepted into the program may reapply for admission the following semester, or may appeal the denial through the appeals process (See Appeals Policy). Anyone denied admittance and who intend to reapply, must schedule a meeting with the Program Director within the first two weeks of the following semester.

Students who fail to submit all of the admission materials for admission into the ATEP will not be considered.
Western Illinois University
Athletic Training Education Program

Application Materials for the ATEP

A prospective athletic training student must submit the following materials to apply to the WIU ATEP:

1. Completed application by November 1st or April 1st.
2. Essay by November 1st or April 1st. (accompanies the Application).
3. Two letters of reference by November 1st or April 1st (sent directly to ATEP by reference).
4. Interview with the ATEP Review Committee by appointment (Date to be assigned).
5. A physical examination is required by the following semester. The physical confirmation form needs to be filled out and submitted to the Program Director (see below). The cost of the physical exam is the responsibility of the student.
6. Signed Technical Standards form by November 1st or April 1st.
7. Completed immunization forms needs to be filled out and handed in by the following semester. The cost for the required immunizations is the responsibility of the student.
8. Academic Progress Grade Sheet.
9. Three clinical rotation observation hours.

All materials (except physical and immunization forms) are required before a decision on your acceptance can be made. The grade point averages (major and cumulative) will be obtained by the Program Director once semester grades are posted.

NOTE: A physical examination can be obtained by one of the physicians on campus (Beu Health Center). There is a fee associated with the physical examination from the Beu Health Center physician. The physical should reflect the demands of the Technical Standards and your general health. The physical form should be signed by the examining physician.
Western Illinois University  
Athletic Training Education Program  

Rating Form for Admission to the ATEP

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>1.</td>
<td><strong>AT 100</strong></td>
</tr>
<tr>
<td></td>
<td>Grade: A = 4  B = 3  C = 2  D = 1  F = 0</td>
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<td></td>
<td><strong>POINTS</strong></td>
</tr>
<tr>
<td>2.</td>
<td><strong>AT 110</strong></td>
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<td></td>
<td>Grade: A = 4  B = 3  C = 2  D = 1  F = 0</td>
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<tr>
<td></td>
<td><strong>POINTS</strong></td>
</tr>
<tr>
<td>3.</td>
<td><strong>KIN 290 (A &amp; P)</strong> = 1 Point if Passed due to transfer</td>
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<td></td>
<td><strong>POINTS</strong></td>
</tr>
<tr>
<td>4.</td>
<td><strong>Cumulative GPA</strong></td>
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<td></td>
<td>Below 2.5 = Denied  2.5 - 2.74 = 1  2.75 - 2.99 = 2  3.0 - 3.49 = 3  3.5 - 4.0 = 4</td>
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<tr>
<td></td>
<td><strong>POINTS</strong></td>
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<tr>
<td>5.</td>
<td><strong>Major GPA</strong></td>
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<td></td>
<td>Below 2.75 = Denied  2.75 - 2.99 = 1  3.0 - 3.49 = 2  3.5 - 4.0 = 3</td>
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<td></td>
<td><strong>POINTS</strong></td>
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<tr>
<td>6.</td>
<td><strong>Academic Progress Grade Sheet</strong> = 1 Point if Competed</td>
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<td></td>
<td><strong>POINTS</strong></td>
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<td>7.</td>
<td><strong>Application</strong> = 1 Point if Complete</td>
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<td></td>
<td><strong>POINTS</strong></td>
</tr>
<tr>
<td>8.</td>
<td><strong>Essay</strong> = 15 Points Total (See Essay Instructions for point breakdown)</td>
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<tr>
<td></td>
<td><strong>POINTS</strong></td>
</tr>
<tr>
<td>9.</td>
<td><strong>Two Letters of Reference</strong> = 1 Point for each one Submitted</td>
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<td></td>
<td><strong>POINTS</strong></td>
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<tr>
<td>10.</td>
<td><strong>Interview</strong> = 48 Total Points Available (Average Score of all Reviewers)</td>
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<td></td>
<td><strong>POINTS</strong></td>
</tr>
<tr>
<td>11.</td>
<td><strong>Competencies and Proficiencies Passed</strong> = 1 Point</td>
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<td></td>
<td><strong>POINTS</strong></td>
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<tr>
<td>12.</td>
<td><strong>Clinical Rotation Observation Hours</strong></td>
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<td>30+ = 4  25–29 = 3  20–24 = 2  15–19 = 1  0–15 = 0</td>
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<td><strong>POINTS</strong></td>
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<tr>
<td>13.</td>
<td><strong>Three Evaluations WIU Student Mentors</strong> = 1 Point Each</td>
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<td><strong>POINTS</strong></td>
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<tr>
<td>14.</td>
<td><strong>Three Evaluations WIU ATCs</strong> = 1 Point Each</td>
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<td></td>
<td><strong>POINTS</strong></td>
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<td></td>
<td><strong>Total Points:</strong></td>
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</table>

Comments:
Western Illinois University
Athletic Training Education Program

Health Policy

1. Each student must receive a physical examination through the Beu Health Center by the start of the semester admittance applies. The Completion Confirmation of Physical Exam form must be signed by the Examiner. It is the responsibility of the student to schedule an appointment for the examination at Beu Health Center. Students are expected to obtain all University required immunizations. The cost of the physical examination, follow-up tests, and/or immunizations is the responsibility of the student.

2. Each student must read and acknowledge the Technical Standards associated with the ATEP.

3. Each student must fill out the health history form indicating dates of immunizations.

4. Each student is recommended to get a series of Hepatitis B (HBV) vaccinations. This series is highly recommended, but not required. If a student should chose to deny the series, an HBV declination form must be signed.

5. Each student must have a tuberculosis skin check each year. It is the responsibility of the student to schedule an appointment for the examination at Beu Health Center and submit this form by the fourth week of the semester. This may be done through Beu Health Center. The cost for this test is the responsibility of the student.

6. Each student must attend yearly blood-borne pathogen training. This is done at WIU at the beginning of each semester.
Personal Information:

Date Submitted: __________________________________________________________

Name: _________________________________________________________________
  Last       First       Middle

WIU ID Number: _________________________________________________________

Permanent Home Address: _______________________________________________
  Street       City       State       Zip

Home Phone: (___) _______________________________________________________

College Address: (___) ___________________________________________________
  Street       City       State       Zip

College Phone: (___) ____________________________________________________

Education:

High School: __________________________ Graduation Date: ________

G.P.A. (on a 4.0 scale) ________

College/University ____________________________________________ (If applicable)

Total Number of College Semester Hours completed to date: __________________

Total Number of Semester Hours completed at WIU: _________________________

Current Overall G.P.A. (on a 4.0 scale): ______________

Current Major G.P.A. (on a 4.0 scale): ______________
**Athletic Training Experience:** Please include all athletic training experience, specific sporting events, clinical experiences, seminars/workshops attended, etc.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

**List the duties you performed in previous athletic training experience:**

________________________________________________________________________

________________________________________________________________________

**Name of the supervising athletic trainer at your school or for the above activities:**

________________________________________________________________________

**Extracurricular Activities Prior to College:** Please list all extracurricular activities you have participated in during high school; e.g. athletics, band, choir, community service, etc.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

**Certifications:** Please list any certifications you hold; e.g. First Aid, CPR, Certified Personal Trainer, etc.

________________________________________________________________________

**Current Organizations & Activities:** Please list any organizations you are a member of or the extra-curricular activities you participate in (Community Clubs, Church Organizations, Fraternities / Sororities, Club Sports, etc) while here at WIU:

________________________________________________________________________

________________________________________________________________________
Are you a Member of an Athletic Team at WIU?     ____ YES     ____ NO

If yes, what sport?  ________________________________

Do you plan to participate in sports at WIU?  ____ YES  ____ NO

If yes, what sport(s)?  ________________________________

Have you received any Awards or Recognitions? Please list any awards, scholarships, or special recognitions, etc that you have received:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Characteristics: After completing your observation hours here at WIU, what personal and professional characteristics do you think an athletic trainer must possess?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Personal Qualities: Based on your personal qualities, describe how you plan to contribute to the WIU Athletic Training Education Program?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Professionalism: Professional behavior is a must with athletic trainers and is demanded of all students in the athletic training program. Explain your view of professional behavior for an athletic training student regarding the following areas.

Dress:
Consumption of alcohol:

Personal relationships with athletes/coaches:

Confidentiality:

Punctually/Dependability:

Honesty:

**Type of work desired after graduation?**

______________________________________________________________

______________________________________________________________

______________________________________________________________

**Essay:** Please enclose a one page typed essay – see Essay Instruction Form for further details. The essay will be evaluated based on the criteria provided on the instruction form.
References: Please list two people from whom you will request completion of our recommendation form, e.g. athletic trainer, coach, counselor, or teacher. These people should be able to speak on your behalf academically and/or professionally.

1. ________________________________
   Name          Position          Work          Phone

2. ________________________________
   Name          Position          Work          Phone

All Application materials must be submitted to:

Renee L. Polubinsky, EdD, ATC, CSCS
Director of Athletic Training
Western Illinois University
Brophy Hall 220B
1 University Circle
Macomb, IL 61455

I understand that application to the Athletic Training Education Program is an opportunity that is not available to every student. I am granting my permission for the Athletic Training Education Program Review Committee to discuss my academic records as part of the review process. By making application, I understand that the information that I will receive regarding the decisions of the Athletic Training Education Program Review Committee will consist of whether I am granted or denied acceptance into the Athletic Training Education Program. I understand that information regarding my final rankings in relation to other candidates and discussions of the committee members is confidential. I also understand the application materials and the videotape (if used) of my interview are the property of the Athletic Training Education Program and will not be provided to me following the committee’s decisions. Upon request, I may view the video and review my academic file following the decision made by the Athletic Training Education Program Review Committee.

Applicant
Signature: ___________________________ Date: ______________________

If accepted into the ATEP a Polo shirt is provided to you. Please circle the size that you would prefer:

SM       MED       LG       XL       XXL
Western Illinois University
Athletic Training Education Program

Application for Admission

ESSAY INSTRUCTION FORM

As part of the Application and Admission process for the ATEP, you must write a brief essay which includes:

1. Your interests in athletic training.
2. Why you wish to be considered for a position as an athletic training student in the Western Illinois University undergraduate Athletic Training Education Program.
3. Your long-term career goals.

Each section will have a point value associated with it for a total of 15 possible points. This essay is one area of admission criteria for which you will be evaluated. The following is a breakdown of the points assigned to each area of the essay.

<table>
<thead>
<tr>
<th>Points Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Essay is typed (1 pt)</td>
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<tr>
<td>2. Essay is double-spaced (1 pt)</td>
</tr>
<tr>
<td>3. Essay uses a Times New Roman font (1 pt)</td>
</tr>
<tr>
<td>4. Essay uses a 12 point font (1 pt)</td>
</tr>
<tr>
<td>5. Essay has one inch margins (1 pt)</td>
</tr>
<tr>
<td>6. Essay is one complete page in length (1 pt)</td>
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<tr>
<td>7. Essay is free of spelling and grammar errors (1/4 pt off for each significant error)</td>
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<tr>
<td>8. Essay answers the questions of:</td>
</tr>
<tr>
<td>a. Interest in athletic training (3 pts)</td>
</tr>
<tr>
<td>b. Desire for admission into WIU’s ATEP (3 pts.)</td>
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<tr>
<td>c. Long-term career goals (3 pts)</td>
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</table>
To the Applicant: Please write your name in the space provided, complete the section regarding your right to review the letter provided by your reference, and then give this form to the individual who has agreed to complete it. It is always helpful if you provide the reference with the completed return envelope. The letters of recommendation should be sent to:

Reneé L. Polubinsky, EdD, ATC, CSCS
Director of Athletic Training
Western Illinois University
Brophy Hall 220B
1 University Circle
Macomb, IL 61455

Name of Applicant: ____________________________________________________________

Under the Family Educational Rights and Privacy Act of 1974, students are given the right to inspect their records, including their letters of recommendation, unless they have waived their right to review. You have the option of waiving your right to access this letter of recommendation or decline to waive that right. Some people prefer not to complete a recommendation form unless the student has waived their right to review. Comments provided by the reference are maintained in confidence and can be a great assistance in determining the suitability of the candidate’s admission to the program. Regardless of your decision, your application will be given full consideration based on all of the information in your application file. Therefore, please complete the statement below:

____ I do ____ I do not waive my right of subsequent access to this recommendation form.

Applicant’s Signature: ____________________________ Date: ________________

To the Evaluator: Your assistance is requested in evaluating this applicant’s qualifications for admittance into the Athletic Training Education Program at Western Illinois University. Please evaluate the candidate on the qualities that are listed below. Additional comments are also appreciated. This form must be completed and returned by _____________ to insure the candidate’s consideration for the Program.

1. How long have you known the applicant? _________________________________

2. What is your relationship to the applicant? (e.g., employer, teacher, supervisor, friend) _________________________________
3. What is your occupation? _______________________________________________________

4. Please check in the appropriate column your evaluation of the applicant’s characteristics, as listed below.

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<tr>
<th></th>
<th>Outstanding (Top 5%)</th>
<th>Excellent (Top 15%)</th>
<th>Average (Top 25%)</th>
<th>Average (25-50%)</th>
<th>Below Average (Bottom 50%)</th>
<th>No Opportunity To Observe</th>
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</thead>
<tbody>
<tr>
<td>Intellectual Ability</td>
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<td>Acceptance of Responsibility</td>
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<tr>
<td>Initiative—does tasks without being asked</td>
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<tr>
<td>Emotional Maturity</td>
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<tr>
<td>Integrity/Honesty</td>
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<td>Attendance &amp; Promptness</td>
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<td>Ability to work with peers</td>
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<td>Ability to communicate orally</td>
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<td>Sense of humor</td>
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<tr>
<td>Writing Skills</td>
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<tr>
<td>Ethics/Standards</td>
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<tr>
<td>Potential as a Leader</td>
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</table>

5. Please use the rating scale for the following areas:

I. Preparation to succeed at the college level:
   Low Preparation                      | Highly Prepared
   1 2 3 4 5 6 7 8 9 10

II. Ability to work independently:
    Needs Constant Supervision          | Highly Independent
    1 2 3 4 5 6 7 8 9 10
III. Leadership Ability:

<table>
<thead>
<tr>
<th>Not Demonstrated</th>
<th>Excellent Leader</th>
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</thead>
<tbody>
<tr>
<td>1 2 3 4 5 6 7 8 9 10</td>
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</table>

IV. Ability to work well in groups:

<table>
<thead>
<tr>
<th>Low</th>
<th>High</th>
</tr>
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<tbody>
<tr>
<td>1 2 3 4 5 6 7 8 9 10</td>
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</table>

V. Ability to succeed as a medical professional:

<table>
<thead>
<tr>
<th>Low</th>
<th>High</th>
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<tbody>
<tr>
<td>1 2 3 4 5 6 7 8 9 10</td>
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</table>

VI. Overall, I would rate this candidate:

<table>
<thead>
<tr>
<th>Low</th>
<th>High</th>
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<tbody>
<tr>
<td>1 2 3 4 5 6 7 8 9 10</td>
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</table>

6. Admission to the Athletic Training Education Program at Western Illinois University is a competitive process. Please elaborate on the strengths or characteristics of this applicant that you feel would make him/her successful in the field of athletic training. (Use the space below, write on back, or attach an extra sheet)

7. Recognizing that everyone can improve him or herself professionally and personally, please describe the areas that you feel the student could improve upon.
8. Overall Recommendation:

| _____ Highly Recommend | _____ Recommend | _____ Recommend with Reservations | _____ Do not Recommend |

Name: ______________________________________________________________

Title/Position: ______________________________________________________

Name of Institution/Business: _________________________________________

Address: ___________________________________________________________

Phone: _____________________________________________________________

Signature: ___________________________________ Date: _____________

Thank you for your valuable time and thoughts in completing this confidential recommendation form. Please return in the envelope provided.
Western Illinois University
Athletic Training Education Program

Completion Confirmation of Physical Examination, Hepatitis B, and TB Skin Test

Name_______________________________

The above named athletic training student has completed the required physical examination at Beu Health Center for participation in the CAATE-accredited Athletic Training Education Program at Western Illinois University.

1. A health evaluation of the student has been completed.

2. The results of the student’s health evaluation have been discussed with them and the impact their health status will have on their meeting of the Technical Standards of the Athletic Training Education Program.

3. The athletic training student has been encouraged to obtain Hepatitis B vaccination and has had an opportunity to have all questions answered related Blood-Borne Pathogens, the Hepatitis B vaccination and involvement in the Athletic Training Education Program.

   The student has decided to:

   Accept Vaccination: _______________ OR Decline Vaccine: _______________  
   (Athletic training student to initial choice for vaccination or declination)

4. The athletic training student has been informed of and made aware of how to access health services through Beu Health Center.

5. The athletic training student has obtained an annual TB Skin Test as required by the Athletic Training Education Program.

The Examiner finds no acute infection, active communicable disease, or infective illness that would inhibit the athletic training student’s contact with patients.

Date___________ Examiner’s Signature__________________________________________
TECHNICAL STANDARDS FOR ADMISSION

The Athletic Training Education Program at Western Illinois 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 Education 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 Education 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 Education Program must demonstrate:

1. the ability to assimilate, analyze, synthesize, integrate concepts; problem solve to formulate assessment and therapeutic judgments; and distinguish deviations from the norm.

2. the ability 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.

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.
TECHNICAL STANDARDS STATEMENT FORM

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 Western Illinois University Disability Support Services 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 reasonable appropriate accommodations will be determined by Disability Support Services (DSS) in consultation with the student, and disclosed to appropriate personnel via an accommodation letter. A meeting between student, DSS staff, and Athletic Training Education Program Director may be necessary to determine the essential functions and skills of the program and appropriate accommodations that can be implemented.

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
# IMMMUNIZATION RECORD

<table>
<thead>
<tr>
<th>Type of vaccine</th>
<th>Mo/Day/Yr</th>
<th>Mo/Day/Yr</th>
<th>Mo/Day/Yr</th>
<th>Mo/Day/Yr</th>
<th>Mo/Day/Yr</th>
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<tbody>
<tr>
<td>Diptheria, Pertussis, and Tetanus(DPT)</td>
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<td></td>
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<tr>
<td>(Series of three for international students only)</td>
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<tr>
<td>Tetanus and Diphtheria (Td)</td>
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<td>(One required within the last 10 years)</td>
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<tr>
<td>Combined Measles, Mumps, Rubella</td>
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<tr>
<td>(MMR)(One required on or after First birthday)</td>
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<tr>
<td>Rubella (Red Measles) Live Virus Vaccine</td>
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<td>(If individual shots are given, then two required on or after First birthday)</td>
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<td>Rubella (German or Three-Day Measles)</td>
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<td>(If individual shots are given, then one required on or after First birthday)</td>
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<td>Mumps</td>
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<td>(If individual shots are given, then one required on or after First birthday)</td>
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<td>Hepatitis A Series</td>
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<td>(Not Required)</td>
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<td>Hepatitis B Series</td>
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<td>(Recommended –not required)</td>
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<td>Influenza</td>
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<td>Meningitis (Not Required)</td>
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<td>Varicella (Varivax) MSD (Chickenpox)(Not required)</td>
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REQUIRED FOR INTERNATIONAL STUDENTS AND DESIGNATED PROGRAMS ONLY. TO BE ADMINISTERED ON CAMPUS OR IN THE UNITED STATES:

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<tr>
<td><strong>TUBERCULOSIS</strong></td>
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<td><em>(Mantaux method)</em></td>
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<td>Skin test given</td>
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<td>(0.1 ml/5 TU PPD)</td>
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<td>Skin test read</td>
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<td>Result in mm</td>
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<td>Chest x-ray taken</td>
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<td>Chest x-ray result</td>
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Above information needs to be submitted no later than the 10th day of the student’s first semester at WIU. Appropriate medical personnel should fill in necessary dates and verify by signature or stamp below (or other signed documentation of immunizations can be attached).

______________________________________________________________  Date ____________________

*For office use only: Date received __________________  Initials __________________*
Western Illinois University
Athletic Training Education Program

Appeals Process for Students Denied Admission to the ATEP

1. Each student has the opportunity to appeal once denied admission into the ATEP.

2. If the student would like to appeal, he/she must first contact the ATEP Director and state the desired intention to appeal.

3. The student and the ATEP Director will set up a meeting to discuss the student’s concerns about the admission denial.

4. The student and the ATEP Director will discuss the reasons for admission denial into the ATEP as determined by the ATEP Review Committee.

5. If the student is not satisfied with the initial meeting and discussion, the student may set up a meeting with the Chair of the Kinesiology Department and the ATEP Director. This meeting will discuss the reasons for denial into the ATEP.

6. A final decision will be made regarding admission denial into the ATEP after meeting with the ATEP Director and/or ATEP Director and Chair of the Kinesiology Department.
Western Illinois University
Athletic Training Education Program

Retention Policy

The following requirements must be met in order to maintain a position in the ATEP.

1. Maintain a minimum of a 2.75 Grade Point Average (GPA) in the major courses.

2. Maintain a Cumulative Grade Point Average (CGPA) of 2.50 or better in all course work.

3. Must pass all clinical education course competencies and proficiencies.

4. Maintain scheduled hours every semester including the off-site rotations.

5. Abide by the policies and procedures of the ATEP.

6. Attend all meetings and in-services called by the ATEP.

7. Receive an annual TB skin test and attend an annual blood borne pathogen training.

8. Must renew certification in CPR for the Professional Rescuer annually.

9. Schedule an appointment with the Academic Advisor every semester.

10. Agree to and sign the Athletic Training Student Acceptance Agreement.

11. Agree to and sign the Policies and Procedures Acknowledgement Form.

NOTE: If a student fails to meet the above retention criteria, that student will be on a probationary status and be given one semester to make progress towards the required deficient standard(s). If the student fails to make progress each semester he/she forfeits their position in the ATEP.

*Students must be in good standing with the retention criteria prior to being cleared for Internship. If a student fails to be in good standing with all retention requirements before Internship, he/she will be denied enrollment for this culminating experience until all requirements are met.
Western Illinois University
Athletic Training Education Program

Probationary Policy

1. Any student who fails to meet the retention standards will be on probation status.

2. If a current student is on a probationary status and fails to make progress towards the deficient retention standard(s) within the following semester, that student will then be dismissed from the ATEP.

3. If the student is on probation due to the failure to maintain the minimum GPA (cumulative &/or major), he/she must continue to demonstrate progress toward the minimum GPA(s) level every semester. If the student fails to make progress toward the minimum GPA(s) every semester he/she will be dismissed from the ATEP.

4. A student that is on probationary status cannot actively participate in ATEP or Athletic Training Student Association (ATSA) organized functions.

5. A student that is on probationary status forfeits his/her position as a board member on the ATSA until removed from the probationary status.

6. A student on probation can be required to attend the remedial education training sessions if deemed necessary by the Program Director.

7. A student on probation due to the failure to meet the minimum GPA(s) (cumulative or major) will not be cleared for the Internship experience.
Western Illinois University
Athletic Training Education Program

Graduation Requirements

Western Illinois University confers a Bachelor of Science degree to athletic training students who have met all of the requirements listed here:

1. Complete all of the General Education Curriculum requirements.

2. Earn a minimum overall grade point average of 2.50 for all credited work and 2.75 grade point average for credited work in the athletic training major.

3. Complete the department major requirements for semester hours.

4. Fulfill the Writing in the Discipline (WID) requirement for the major.

5. Earn a minimum of 120 semester hours of credit. At least 60 of those hours must be from a four-year college or university; at least 40 must be earned in upper division courses (numbered 300 and above) from a four-year institution.

6. Complete at least 30 hours while in residence at WIU, at least 15 of which must be taken in the year prior to graduation. No more that 10 of these hours can be taken in pass/fail or noncredit courses. Credit earned by proficiency examination does not satisfy residence requirements.

7. Demonstrate ability to use baccalaureate-level skills in mathematics.

8. File an application for graduation in the Office of the Registrar during the last semester as a junior.

9. Clear all financial and administrative obligations to the University before proof of degree will be provided.

10. Complete the Internship experience.

11. Accumulate 800 direct supervision hours from a Certified Athletic Trainer.

12. Pass all ATEP courses, including the competencies and proficiencies as noted in the NATA Educational Competencies.

13. Satisfy all Kinesiology Department criteria for graduation, including satisfactory completion of KIN 167/168 and KIN 467/468. These four courses are the department assessment courses in both physical and cognitive elements. Students
must pass physical fitness tests at the stated normative values to be eligible for the Internship placement. Students must also pass the cognitive test which is based on the five department core courses at a 70% level prior to being cleared for Internship. The department core courses include Motor Behavior, Anatomy & Physiology I, Sport & Exercise Psychology, Physiology of Exercise, and Biomechanics.
Western Illinois University
Athletic Training Education Program

Personal Transportation Policy

All athletic training students participating in observational hours or clinical rotation experiences as requirements for the AT 110, AT 211, AT 301, AT 311, AT 401, and AT 411 courses, may be assigned to one or more off-campus clinical sites. Athletic training students will be responsible for providing their own transportation to and from the off-campus site(s). Public (WIU’s free bus system) or personal transportation (bicycle, motorcycle, automobile, etc) are acceptable sources for meeting this requirement, therefore, lack of a personal vehicle or driver’s license, will not be tolerated as an excuse for tardiness or failure to complete an off-site clinical rotation/experience. The city of Macomb provides free public bus transportation that has routes to all of the affiliated sites.

If an athletic training student uses personal transportation, he/she will be responsible for gas and maintenance for the vehicle. There will be no reimbursement for gas or mileage. It is also assumed that the student carries insurance on the vehicle and therefore, in case of an accident, the University and/or Athletic Training Education Program will not be held liable.

If public or personal transportation cannot be obtained by the athletic training student for any reason, it will be his/her responsibility to make arrangements with outside sources to arrive on time and safely at the off-campus site. All athletic training students should be aware of this policy of personal transportation. Please discuss with the Clinical Coordinator any problems with transportation to or from an off-site clinical rotation experience.
Western Illinois University
Athletic Training Education Program

Admission Requirements and Application Process Acknowledgment

Name: ___________________________ Date: ________________

PLEASE PRINT

By signing this form, I have been informed of the admission requirements and application process for Western Illinois University’s Athletic Training Education Program (ATEP). I also understand the appeals policy, retention standards, probationary process, and graduation requirements for the ATEP as well as accept the personal transportation requirements of the program.

I have read and fully understand the Western Illinois University ATEP admission standards.

Athletic Training Student Date

Athletic Training Education Program Director Date