

NAME:

Net ID#:

## Athletic Training Clinical Graduate Assistantship Application Texas State University

**IMPORTANT:** Please make sure to save this form as a PDF document upon completion **before** uploading to your application. The Graduate Admissions Document Upload system only allows PDF formats.

Are you a member of the NATA? Yes  No  Membership#

Are you a certified athletic trainer? Yes  No

If yes, please answer parts (a) through (c) below; if “no,” go on to the next question:

- (a) What is your certification number?
- (b) When were you certified?
- (c) Via what route were you certified?

CAATE accredited curriculum

Internship route

Other (please specify):

If you are already certified, please include a copy of the BOC card with this form as one PDF document.

If not certified, what is the date you plan to take the BOC examination?

**AFTER SAVING THIS FORM AS A PDF, PLEASE turn form in to Dr. Carla Heffner  
NO LATER THAN FEBRUARY 1.**