

Palomar College

Student Athletic Trainer APPLICATION

Complete this form to the best of your abilities.

PERSONAL INFORMATION:

Name: _____
SS#: _____
Birthdate: _____ Age: _____ Year in _____
School: _____
Address: _____

Street City Zip
Telephone (home): _____ (work): _____

EDUCATIONAL BACKGROUND:

Name	Degree	Dates
High School: _____		
Community College: _____		
College/University: _____		
GPA: High School _____ Undergrad: _____ Grad: _____ Major: _____		

ATHLETIC TRAINING COURSE WORK COMPLETED AND/OR IN PROGRESS:

School	Grade
Personal Health: _____	
Human Anatomy: _____	
Kinesiology/Biomechanics: _____	
Human Physiology: _____	
Exercise Physiology: _____	
Basic Training: _____	Athletic
Advanced Training: _____	Athletic
First Aid: _____	
CPR: _____	
Other: _____	

EXPERIENCE:

Please list any previous Athletic Training or related experiences (i.e. physical therapy, hospital, coaching, etc.) if applicable.

Supervisor	Type of Work	Dates
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List any seminars, workshops and/or special courses you have attended that relate to Athletic Training

Topic	Instructor	Date
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Please send the following information:

- 1. Completed Application Form**
- 2. Candidate's Statement: a brief letter stating your interest in Athletic Training and your professional goals**

To:

**Flecia Heise, ATC & Dennis Greenhill, ATC
Athletic Trainers
Palomar College
1140 W. Mission Road
San Marcos, CA 92069**

(760) 744-1150, ext. 2477