

UNCG
Master of Science in Athletic Training (MSAT) degree

Thank you for your interest in the UNCG Entry-Level Athletic Training Education Program (ATEP). The following packet will provide you with all the information needed to complete your application. Please note that the application process involves submission to the 1) UNCG Graduate School, 2) UNCG Department of Kinesiology, and the 3) UNCG ATEP Program Director. The following checklists should be used to ensure that your application materials are completed properly.

Materials to be submitted to the Graduate School

Please refer to the Graduate School's website to ensure you have the most up-to-date forms

- Application Card
- \$ 45 Application Fee
- Traditional Application
- Official transcripts from **all** colleges/universities attended
- Grad. School Recommendation forms (3)
- GRE Scores
- NC Residency**
- International Application**
- Intl. App. Financial Certification**
- Bank Statement**
- Affidavit of Support **

- Visa Information Form **
- TOEFL or IELTS scores**

Complete online at:

<http://www.uncg.edu/grs/prospective/forms.html>

Mail to:

The Graduate School
The University of North Carolina at Greensboro
241 Mossman Bldg
P.O. Box 26170
Greensboro, NC 27402-6170

** *If applicable*

Materials to be submitted to the Department of Kinesiology

- KIN Supplemental Application

Mail to:

Paige Morris
Graduate Secretary
Department of Kinesiology
250 HHP Bldg.
1408 Walker Ave
Greensboro, NC 27412

Materials to be submitted to the MSAT Program Director

- Application Essay Form
- Academic Information Form
- Clinical Observation Hours Log
- ATEP Recommendation forms (3)
- Personal Resume
- Course syllabi for all prerequisite courses

Mail to:

Aaron B Terranova, EdD, ATC
Director, Entry-Level Master's ATEP
237 HHP
1408 Walker Ave
Greensboro, NC 27412

Graduate School Application Materials

Persons who seek admission for graduate study at UNCG must submit a formal application.

Please refer to the following website for any questions or concerns regarding the Graduate School Application: <http://www.uncg.edu/grs/prospective/index.html>

Please note that while you can submit a paper application, UNCG prefers to receive your application electronically. [Apply online here](#). If submitting a paper application, please mail all materials to:

The Graduate School
The University of North Carolina at Greensboro
241 Mossman Bldg
P.O. Box 26170
Greensboro, NC 27402-6170

Application materials to be completed and submitted directly to the Graduate School:

1. Traditional Application: (*International students please see below*)
<http://www.uncg.edu/grs/forms/GraduateAdmApplication.pdf>
2. Request for transcripts: (*Academic records from every college and university previously attended even if the courses from one school appear on the transcript of another [NOTE-if you have attended UNCG in the past you don't need to have a transcript sent to us]*)
<http://www.uncg.edu/grs/forms/TranscriptsRequestform.pdf>
3. Request for recommendation: (*Three recommendations from former professors, employers, or persons well acquainted with the student's academic potential*)
<http://www.uncg.edu/grs/forms/RequestForRecommendation.pdf>
4. Official GRE Test Scores: (*Satisfactory scores on the "General" section of the Graduate Record Examination (GRE) or other authorized examination as required by the respective graduate degree programs. (See application materials.)*)
<http://www.uncg.edu/grs/prospective/tests.html>
5. North Carolina Residency Form*: (*Only for students claiming legal residence (domicile) in the state of North Carolina*)
<http://www.uncg.edu/grs/forms/Residenttuitionpolicy.pdf>

Additional Information required for international nonresident aliens

1. International Application:
<http://www.uncg.edu/grs/forms/IntnlAdmissinApplication.pdf>
2. International Application Financial Certification: (**MUST** accompany the International application)
<http://www.uncg.edu/grs/forms/07-08FinancialCertificate.pdf>

3. Bank Statement: *(Current original bank statement(s) documenting your ability to support your study at UNCG)*

<http://www.uncg.edu/ipg/students/studying/iss/financialrequirements/07-08TuitionandFees.pdf>

4. Affidavit of Support: *(If the funds are not in your name, download the form Affidavit of Support, have your sponsor fill out and sign the form. An Affidavit of Support form **can be used** to demonstrate financial resources)*

<http://www.uncg.edu/ipg/students/studying/iss/financialrequirements/07-08AffidavitofSupport.pdf>

5. Visa Information Form: *(Use this form only if currently in the U.S. as a Non-Immigrant Resident)*

<http://www.uncg.edu/ipg/students/studying/iss/visasatusinformationform.pdf>

6. TOEFL (minimal 79-80 on the internet based test, 213 on the computerized test and 550 on the paper test) or IELTS score (minimum 6.5) *(All applicants who are non-native speakers of English, unless the applicant is a citizen of a country, or graduate of a university, where English is the official language) For language training available at UNCG please go to:*

<http://www.uncg.edu/ipg/interlink/>



THE UNIVERSITY of NORTH CAROLINA
GREENSBORO

Department of Kinesiology

Supplementary Application for Graduate Admission

Please complete all sections (Cover Page, and Parts I-III as indicated), and mail the application and all requested accompanying materials directly to:

Paige Morris
Department of Exercise and Sport Science
250 HHP Building
PO Box 26170
The University of North Carolina at Greensboro
Greensboro, NC 27402-6170

*Note: Please be certain to check the **Athletic Training (Entry-level)** as the area of specialization.*

THE UNIVERSITY OF NORTH CAROLINA AT GREENSBORO
DEPARTMENT OF EXERCISE AND SPORT SCIENCE
Supplement to Application for Graduate Admission

COVER PAGE

Date: _____

Name: _____

Credentials: _____

SS / ID#: _____

E-Mail: _____

Address: _____

Phone: _____

Last Degree Completed or in Progress: BA/BS MA/MS Other: _____

Degree Sought : MEd/MS Ed.D. PhD

Term Applying For: Fall Spring Summer **Year:** _____

Primary Specialization: Please indicate your primary specialization of interest from the appropriate degree program listed below. Program information and faculty expertise within each specialization can be found on our departmental website at <http://www.uncg.edu/ess/grad.html>. Applicants may include secondary or combined interest areas in their statement of goals. Please note that doctoral degree applicants (PhD or EdD) must have completed a masters degree prior to enrollment.

Masters Degree Specializations (Check one)

- Athletic Training (Entry Level)*
- Exercise Physiology*
- Pedagogy/Teaching and Teacher Education*
 - Community Youth Sport Development*
 - Supervision/Curriculum in Physical Education*
- Motor Behavior*
- Sociohistorical Studies of Physical Activity*
- Sport and Exercise Psychology*
- Sports Medicine*

Doctoral Degree Specializations (Check one)

- Exercise Physiology(Ph.D.)*
- Pedagogy/Teaching and Teacher Education (Ph.D.)*
- Sport and Exercise Psychology (Ph.D.)*
- Sports Medicine (Ph.D.)*
- Professional Doctoral Program in ESS (Ed.D.)*

Please complete and attach along with this application Parts I and II (masters degree applicants) or Parts I-III (doctoral degree applicants).

PART I: Statement of Goals

Please discuss why you have chosen to pursue graduate studies at UNCG, and describe your goals for graduate study, and areas of research interest or intended focus of advanced work. Please also discuss how the knowledge gained from this degree program will contribute to your future career and professional growth. If you have a secondary area of interest / specialization in addition to the one you previously checked, please discuss this in your goals statement as appropriate. All applicants must submit a statement of goals. Please limit your response to 2 pages.

Part II: Supplemental Information.

Please attach to this application a resume or vita, with the following information:

1. Education
2. Certifications or Licensures (e.g. E.M.T., A.T.,C., P.T., C.S.C.S., etc)
3. Professional and Work Experience
4. Professional Presentations (local, regional or national)
5. Professional Publications (abstracts, journal articles, books)
6. Community Service Activities
7. Honors and Awards

Part III: Recent Scholarly Work (Doctoral Applicants only).

Please attach to this application a copy of a 3-5 page writing sample, preferably a recent scholarly paper that you have written (i.e., a published journal article, or a section of a course term paper, literature review, or thesis).



THE UNIVERSITY *of* NORTH CAROLINA
GREENSBORO

Master of Science in Athletic Training (MSAT) Degree Program Application Materials

Please refer to the following website for any questions or concerns regarding the ATEP Application:
<http://www.uncg.edu/kin/atep/>

Checklist of items to be sent to the Program Director:

- Personal resume
- Application Essay Form
- Academic Information Form
- Clinical Observation Hours Log
- ATEP Recommendation Form (3 references are required. One must be from an ATC who supervised you during your clinical observation hours)
- Course syllabus for human anatomy (lecture and lab)
- Course syllabus for physiology (lecture and lab)
- Course syllabus for exercise physiology
- Course syllabus for personal health
- Course syllabus for nutrition
- Course syllabus for biomechanics/kinesiology

Please mail the aforementioned materials to:

Aaron B Terranova, EdD, ATC
Director, Entry-Level Master's Athletic Training Education Program
Dept. of Kinesiology
237 HHP
1408 Walker Avenue
Greensboro, NC 27402

**MASTER OF SCIENCE IN ATHLETIC TRAINING
ACADEMIC INFORMATION FORM
PLEASE TYPE**

Full Name: _____ **Application for Summer of:** _____

Address: _____ **State:** _____ **Zip:** _____

Email: _____ **Telephone Number:** _____

Undergraduate Institution: _____ **Undergraduate Major:** _____

Current overall GPA: _____ **GRE Verbal Score:** _____ **GRE Quantitative Score:** _____ **GRE Writing Score:** _____ **TOEFL score (if applicable):** _____

If you have not taken the GRE indicate when you plan to take it: _____

Please complete the following table regarding the required prerequisite courses. Course syllabi must be included with the application in order to verify minimum content requirements.

Prerequisite Course	Course prefix, number, and name	Institution and date where taken	Grade
Human anatomy- Minimum content requirements: Human anatomy with study of skeletons, models, and anatomical preparations			
Human physiology - Minimum content requirement: Human physiology with emphasis on homeostatic mechanisms			
Exercise physiology - Minimum content requirement: Understanding of factors affecting the physiological function of the body related to exercise and physical performance. Laboratory provides experiences in evaluating these physiological factors			
Personal Health- Minimum content requirement: Study of determinants of healthful and safe living for various age groups. *Please note that activity-based courses (e.g., walking, jogging) will not fulfill this requirement..			
Nutrition - Minimum content requirement: Basic principles of human nutrition with emphasis on the nutrients and factors which affect their utilization in the human body			
Biomechanics/kinesiology - Minimum content requirement: Anatomical and mechanical bases of physical activity with emphasis on the analysis of sport and exercise skills.			

**MASTER OF SCIENCE IN ATHLETIC TRAINING
CLINICAL OBSERVATION HOURS LOG
PLEASE TYPE**

You are required to obtain at least 200 hours of observation experience under the supervision of a Certified Athletic Trainer (ATC). Please list and briefly describe the required athletic training observations as well as any other relevant athletic training related experiences. You may submit multiple copies of this log if necessary. Please type directly in the table. The cells will expand as you type.

- *Please note that hours obtained under the supervision of a Physical Therapist do NOT count unless the individual is dual credentialed as an ATC/PT.*
- *International students who do not have access to an AT in their home country are encouraged to move to the United States and complete their hours prior to applying to the program.*

Name of Supervising Athletic Trainer	Setting	Sport (If applicable)	Describe your involvement	Number of Hours	Dates	AT Signature*

* By signing my name I attest that the hours record in this log are accurate and were acquired under my supervision.

**MASTER OF SCIENCE IN ATHLETIC TRAINING
RECOMMENDATION FORM**

The Applicant must sign and date ONE of the following statements prior to giving it to the referrer:

I wish to have access to this recommendation and I understand that under the Family Education and Rights to Privacy Act I have the right to read this recommendation

Applicant's Name (Print) _____

Applicant's Signature: _____ Date: _____

I wish this letter to be confidential and I hereby waive all access rights to this recommendation

Applicant's Name (Print) _____

Applicant's Signature: _____ Date: _____

For the Referrer: Please rate this applicant as compared with other students or employees who you have supervised. A letter **may be written in addition** to this recommendation form. Please place this completed recommendation form or letter in a sealed, signed envelope and return to applicant, or mail to: **Dr. Aaron Terranova, 237 B- HHP, 1408 Walker Ave, Greensboro, NC 27412**

Referrer's name: _____

Title/Position: _____

Employer: _____

Email address: _____

Telephone number: _____

Approximately how long have you known this applicant? _____

In what capacity have you known this applicant _____

How well do you feel you know this applicant? Causally Well Very Well

Please rate this applicant as compared with other students or employees who you have supervised.	Top 2%	Top 10%	Top 25%	Top 50%	Bottom 50%	No basis
Interest in the profession of athletic training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Critical thinking skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to maintain patient confidentiality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Problem solving skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Acceptance of responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Independence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Persistence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to accept constructive criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to multi-task	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cultural competence/cultural sensitivity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ethical behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Signature: _____ **Date:** _____