



# STUDENT ATHLETIC TRAINER APPLICATION

---

## GENERAL INFORMATION

Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Can I text you at this number? Yes / No

How did you find out about the Hill College Student Athletic Trainer Program? \_\_\_\_\_

Were you a student trainer in high school? Yes / No High school GPA & class rank: \_\_\_\_\_

If yes, list name of high school and athletic trainer: \_\_\_\_\_

High School Athletic Trainer Contact Info: \_\_\_\_\_

Phone

Email

If no, were you in athletics? Yes / No What sports? \_\_\_\_\_

High School Awards: \_\_\_\_\_

Parent's/Guardian's Names: \_\_\_\_\_

---

## REFERENCES

List two professional references (non-relative) in the space provided below and provide a letter of reference from each.

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Years Known: \_\_\_\_\_

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Years Known: \_\_\_\_\_