

**D1- Kathleen Laquale Professional Development Scholarship Application
Rhode Island Athletic Trainers Association**

Eligibility Requirements:

- * Any member – either student or professional of the Rhode Island Athletic Trainers' Association in good standing
- * Must be a Rhode Island resident
- * Must be present when accepting the scholarship- Presentation TBA

Amount of Scholarship:

- * The recipient receives \$1000.00 which is to be used for educational purposes during the remainder of the year.

Prerequisites:

- * Current NATA student or professional member
- * Exhibits good citizenship
- * Shows sincere interest in athletic training and exemplifies a positive attitude in all endeavors
- * Scholarship used to enroll in an accredited course in the field of sports medicine or a related field of study

Application Procedure:

- * Application form completed
- * Cover letter and resume
- * Reference from a current RIATA member
- * Reference of choice (not a RIATA member). Letters of recommendation should be based on the extent and quality of service provided in the field of athletic training.
- * Deadlines for all material are due by April 15th of each year and should be turned into the Honors and Awards Chair of the RIATA or State President
- * Submit completed application to:

Bryn VanPatten
One Cunningham Square- Athletic Training Department
Providence College
Providence, RI 02918

Division 1 Dr. Kathleen Laquale Scholarship
Rhode Island Athletic Trainers' Association
Professional Development Application

Name: _____
Last First MI

Home Address: _____
Street City State Zip

Home Phone: _____

Date of Birth: _____ Place of Birth: _____
City State

US Citizen: Yes _____ No _____

College or University: _____

School Address: _____
Street City State Zip

School Phone Number

Current Class Standing: Junior _____ Senior _____ Grad Student _____

Major: _____

Are you enrolled in a CAATE approved educational program? Yes _____ No _____

Overall Grade Point Average: _____

Faculty Advisor's Name: _____

Years of Athletic Training Experience: _____

Are you a member of the NATA? Yes _____ No _____ If yes, member #: _____

Applicant's Signature

Date