

Student ID Number:

Student Name:

## MSAT 3 + 2 Concurrent Enrollment Program ADMISSIONS APPLICATION FORM

Date: \_\_\_\_

Cell Phone #:

This application is to be completed before the preregistration date of the spring semester prior to the fall semester you wish to be admitted to the MS Athletic Training Program. This form needs to be completed in addition to the ATCAS application you will submit for program admittance.

Local Address: \_\_\_\_\_ City: \_\_\_\_ ST: \_\_\_\_ Zip: \_\_\_\_

Email Address:					
Current CMU major:					
Credit hours comp	lete at the end of t	his semester:			
Overall GPA:		Exercise Science GPA:			
following table ou	tlining how you w ote – you must co	lance from the MS rill finish both your mplete ALL bachele requirements.	Exercise Science a	nd Athletic Trainir	ng degrees in the
4 <sup>th</sup> Summer – Year:		4 <sup>th</sup> Fall – Year:		4 <sup>th</sup> Spring – Year:	
Elective:		ATRN 511 (1)		ATRN 502 (3)	
Elective:		ATRN 521 (4)*		ATRN 522 (4)	
		ATRN 531 (2)		ATRN 523 (1)	
		KINE 501 (3)		ATRN 532 (2)**	
		Course:		Course:	
		Course:		KINE 494 (1)	
	Total Hours:		Total Hours:		Total Hours:
5 <sup>th</sup> Summer – Year:		5 <sup>th</sup> Fall – Year:		5 <sup>th</sup> Spring – Year:	
Elective:		ATRN 513 (3)		ATRN 512 (3)	
Elective:		ATRN 533 (3)		ATRN 524 (3)	
		KINE 587 (3)		ATRN 534 (3)	
	m . 1 xx		T . 1		T . 1
	Total Hours:		Total Hours: 9		Total Hours: 9
* C	4	DC E			
		r BS Exercise Scien	ice		
** Counts towards KINE 499 for BS Exercise Science					