

**Illinois Athletic Trainers' Association, Inc.**  
**Offspring Scholarship Application**  
**Section I**

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

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

University: \_\_\_\_\_

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

School Address: \_\_\_\_\_

School Phone: \_\_\_\_\_

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

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

Undergraduate Major: \_\_\_\_\_

Undergraduate Minor: \_\_\_\_\_

Graduate Major: \_\_\_\_\_

Cumulative GPA at the time of application (based on a 4.0 scale): \_\_\_\_\_

Organizations/Activities/Positions Held: \_\_\_\_\_

Academic Awards: \_\_\_\_\_

Other Awards/Recognitions: \_\_\_\_\_

\_\_\_\_\_

What is your planned course of study in college: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Community/Service Organization Involvement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Clinics or professional meetings, community meetings, and/or meetings regarding your field of study in which you have attended: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parent's name who is a Certified/Licensed member of the IATA: \_\_\_\_\_

\_\_\_\_\_

Current Class: \_\_\_\_\_ Upcoming Academic Year: \_\_\_\_\_

I certify that the information contained in this application is correct and accurate to the best of my knowledge.

\_\_\_\_\_  
Signature of Applicant



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Section III: Autobiographical Sketch

(To be completed by the applicant)

**MUST BE TYPED**

You should include your reasons for wanting the scholarship; your outstanding qualities, characteristics and educational goals; clinics or professional meetings attended or involved in; awards won in high school and college; organizations to which you belong or belonged to in the past; athletic team involvement, jobs which you held during the summer or while attending school. Limit your sketch to front and back of this sheet.

Name of Applicant: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_