



Minnesota Athletic Trainers' Association Professional Level
ElevATe Scholarship Application

Applicants must be enrolled in an athletic training education program or an athletic trainer pursuing a post graduate professional degree in athletic training or related field for the 2025-2026 or 2026-2027 academic year.

Applicant Full Name (first/middle/last) _____

Address, City, State, Zip _____

Phone _____ Email _____

NATA Member # _____ NPI # _____ MNBOMP Registration # _____

BOC Certification Date _____ BOC # _____

Undergraduate College/University _____

Current or Intended Post- Graduate College/University _____

Current or Intended Degree _____

Cumulative overall GPA (based on a 4.0 maximum) for all undergraduate course work _____

Cumulative overall GPA (based on a 4.0 maximum) for all post graduate course work to date _____

Athletic Training Experience (Internships, Leadership roles, Etc.)

Educational Conferences and/or Symposiums (indicate date/location of all educational meetings attended)

Organizations/Activities/Positions Held (school, civic, volunteer, religious, etc.)

Awards and Recognitions (academic or otherwise)

Statement regarding your personal experience(s) that have elevated your desire to practice in the athletic training profession and to utilize your experience(s) to elevate those around you.

Application must include:

- 1.) A typed one-page essay about your interest in the field of Athletic Training, including your professional goals and aspirations. Include your personal experience(s) that have elevated your desire to practice in the athletic training profession and to utilize your experience(s) to elevate those around you.
- 2.) One letter of recommendation from a sponsoring athletic trainer.
- 3.) Current transcript for all undergraduate and athletic training program course work to date.

I (do____) (do not____) plan to pursue the athletic training profession as my primary means of livelihood.

____ I hereby confirm that all of the information in this application is true and accurate.

Signature of Applicant _____ **Date** _____

Letter of recommendation and transcript materials must be postmarked by **March 27, 2026 and mailed to:**

Ronni Beatty-Kollasch M.Ed., LAT, ATC

24123 Superior Drive

Rogers, MN 55374

Phone: (612) 741-6007

Send this application and essay electronically to presidentelect@mnata.com

Award recipients should plan to attend the MATA Annual Meeting & Clinical Symposium on April 10 - 11, 2026.