

TRUMAN STATE UNIVERSITY OBSERVATION HOURS FORM

Applicant Name _____

The applicant must complete 40 observation hours under the supervision of a certified athletic trainer. The certified athletic trainer must sign the completed hours form. The completed form is uploaded with the application on the Truman State University website. Make copies of this form as needed.

Date	Facility Name	Facility Type (high School, college, clinic, etc)	Patient Population	Hours Observed	ATC Signature	Print with credentials

Additional observed hours above the minimum (40)

Date	Facility Name	Facility Type (high School, college, clinic, etc)	Patient Population	Hours Observed	ATC Signature	Print with credentials

Total Observed Hours _____