



Observation Hours Verification Form

Applicants to BGSU's Master of Athletic Training program are required to have a minimum of 40 hours of observation hours under the direct supervision of a certified athletic trainer.

Applicant Name: _____

Supervising ATC Information:

Name:		BOC Number:	
Email:		Organization:	
Phone:		Job Title:	

Date of Observation: _____

Total Hours Observed: _____

Location/Practice setting:

- Secondary School athletics
- Clinic (physician)
- Clinic (rehabilitation)
- Other (please describe) _____
- Collegiate athletics

Description of observation and/or duties:
If you have any comments about the student or observation experience, please share here:

I verify that the student named above completed the hours specified under my direct supervision.

Supervising ATC Signature
(electronic signature ok)

Date

Please email the completed form to: matprogram@bgsu.edu