Thank you for your interest in the NATA Foundation Doctoral Mentor Program! The completed application and a copy of your CV should be sent to kathrynl@nata.org no later than March 15th.

\*\**The program is focused on providing support and mentorship to doctoral students looking to gain additional support around career development. The program is not meant to provide a doctoral student with a doctoral advisor/mentor that facilitates dissertation programming.*

**PERSONAL INFORMATION-Doctoral Mentee**

**Name:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Credentials:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NATA District: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NATA Member Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
College/University: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Current Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of years in current position: \_\_\_\_\_\_\_\_\_**

**Are you currently enrolled in a doctoral program (pursuing a DAT, PhD, EdD, DSc)?** [ ] **YES** [ ] **NO**

**Are you currently completing coursework towards your terminal or clinical doctoral degree?** [ ]  **YES** [ ]  **NO**

**Have you completed at least one year of terminal degree coursework?** [ ] **YES** [ ]  **NO**

**Do you currently have a doctoral/academic advisor with oversight to your degree completion?** [ ] **YES** [ ]  **NO**

**\*\*If yes, please share the name of the person and their employer. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Are you currently serving as funded graduate student (assistantship)?** [ ] **YES** [ ]  **NO**

**What is your anticipated graduation year?**

**ADDITIONAL BACKGROUND INFORMATION**

The following personal demographic questions are optional but may assist with pairing your mentor/mentee.

**What is your current age? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Gender?**

[ ] Woman [ ] Man [ ]  Non-binary/gender nonconforming/third gender [ ] Prefer to self-describe [ ] Prefer not to say

**How long have you been certified as an athletic trainer? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**What is your ethnicity?**

[ ]  Black/African American

[ ]  Asian.

[ ]  White/Caucasian

[ ]  Hispanic, Latino/a/x, or of Spanish Origin

[ ]  Unknown/Prefer not to answer

[ ] American Indian/Alaskan Native

[ ] Multi-Ethnic/Multi-Racial

[ ] Middle Eastern/Northern African

[ ] Native Hawaiian/Pacific Islander

**What is your current employment setting? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**List any personal characteristics and interests (e.g. family, hobbies, etc).**

**PROFESSIONAL BACKGROUND INFORMATION**

**Please describe your interest in the mentor program (e.g. research, teaching, networking):**

**Please describe your research area(s) of expertise and 3-5 current projects you are working on:**

**Please describe your reasons for participation and needs/goals:**

**Please identify (if known) a current athletic training faculty member(s) who may be a good mentor for you, given your interests. Please provide contact information (institution, email, phone number) if available.**

**PROGRAM EXPECTATIONS**

**Requested level of involvement with mentor (check all that apply):**

[ ] Advice (phone calls/email)

[ ] Grant review or assistance (confidential review)

[ ] Manuscript review or assistance (confidential review)

[ ] Technical assistance

[ ] Visiting mentor at his/her facility for learning opportunities, etc.

[ ] Research or other Fellowship

[ ] Active collaboration on a project or grant (co-investigator)

[ ] Teaching and Advising

[ ] Other

Please elaborate:

**Mentor background (check all that apply, and please elaborate below on any boxes checked):** \**we will try our best, to meet these expectations, but cannot guarantee it.*

[ ] Gender

 [ ] Life experiences (family, etc.)

 [ ] Race/Ethnicity

 [ ] Employment setting (i.e R1, liberal arts college, etc.)

 [ ] Other

 Please elaborate:

**OTHER**

**To help us identify, an appropriate mentor, please provide us with any additional information regarding your application and needs for the program, including the type of mentor you are looking for:**

**Questions:** Please contact the program Chair:

Dr. Stephanie M. Singe at Stephanie.m.singe@uconn.edu