

AMERICAN ACADEMY OF SPORTS PHYSICAL THERAPY
Traveling Fellowship Application

TRAVELING FELLOWSHIP APPLICATION FOR FALL 2019 TOUR
Dates: September 12-22, 2019

Fall 2019 Sites:

Bob Mangine – University of Cincinnati, Cincinnati Ohio
John DeWitt – The Ohio State University, Columbus Ohio
Corey Kunzer – The Mayo Clinic, Rochester Minnesota

INSTRUCTIONS:

1. Applicant must be a physical therapist and a member of the American Academy of Sports Physical Therapy practicing in the U.S.
2. Attach recent photograph – passport size to each application.
3. Complete application form and submit with your CV to Mark De Carlo, Executive Director, at mdecarlo@aaspt.org and send \$50.00 nonrefundable deposit to:

AMERICAN ACADEMY OF SPORTS PHYSICAL THERAPY
Traveling Fellowship Application
Mark De Carlo
P.O. Box 431
Zionsville, Indiana 46077

4. Ask only two sponsors to send letters of recommendation to **Mark De Carlo** at mdecarlo@aaspt.org. **It is your responsibility to make sure all forms and letters are received by AASPT by the deadline. The AASPT executive director will contact you as soon as any of your letters arrive, but it is solely your responsibility to stay in touch with your sponsors and make sure your letters arrive before the deadline.**
5. Attach a personal statement, not to exceed 500 words, detailing why you want to be an AASPT Traveling Fellow and what you can offer the program.
6. **All applications and letters of recommendation must be completed and received by AASPT by July 1, 2019.** Incomplete applications or those received after the deadline will not be considered.

PLEASE TYPE:

Name: _____

Age: _____ Date of Birth: _____

APTA Membership #: _____ Citizenship: _____

State Licensure #: _____

Current Position: _____

Current Hospital/Institution: _____

Address: _____

City/State/Zip: _____

Office Phone: _____ Office Fax _____

Cell Phone: _____

Email: _____

Names and address of two physical therapists that will support this application:

PHYSICAL THERAPIST #1

Name: _____

Address: _____

Graduate of _____
College/University

Date Graduated: _____ Degree Earned: _____

PHYSICAL THERAPIST #2

Name: _____

Address: _____

Graduate of _____
College/University

Date Graduated: _____ Degree Earned: _____

Additional Education

Type of Education: _____

From: _____ To: _____

Location: _____

Professional Activities since graduation (name, location, month, year, SPTS section activities).

1. Activity _____

2. Activity: _____

3. Activity: _____

Special Awards and Honors (list special awards received from college on).

What type of practice do you engage in or aspire to?

Academic: _____

Community: _____

Administrative: _____

Research: _____

Other: _____

Please indicate your sports team coverage if any (name of team/years of coverage)

Complete your Curriculum Vitae on a separate attachment according to the following format.

- a. Name of applicant.
- b. List of national, regional and local professional organization/allied health to which you belong.
- c. List the committee appointments, which you received in the above allied health organizations.
- d. Describe any special non-academic achievements or activities which you believe are important; i.e., civic activities, church, scouting, chamber of commerce, etc.
- e. List the articles that you have published. List the name of the article, journal name, authors, page numbers and the date published. Please underline you name and capitalize the name of the journal.
- f. List published abstracts.

- g. List the textbooks or chapters in textbooks, which you have written or edited. Identify title, publisher and year.
- h. List the manuscripts, which have been submitted for publication, identify the article and the journal. Give date of submission.
- i. List the research grants which you have received and the source. List all of the authors in their proper sequence and the amount of each grant.
- j. Describe clinical and basic research work, which is now in progress.
- k. List all the movies, sound slide programs, exhibits, audiotapes and videotapes that you have developed or co-developed. You should also list the scientific meetings where each has been presented.
- l. List national, regional and local postgraduate courses or meetings, which you have organized or hosted.
- m. List scientific presentations, which you have made to national meetings (include title of paper, organization, location, and date).
- n. List scientific presentations of which you were a co-author to a national, regional or local meeting.

Signature of Applicant: _____

Date: _____