



## **NATA LGBTQ+ Advisory Committee iLead Application Guidelines & General Information**

**Information:** The NATA LGBTQ+ Advisory Committee (LGBTQ+ AC) has created a specific application for Athletic Training Students who need financial assistance to attend the 2019 iLead conference.

Information on the 2019 iLead conference can be found here:  
<https://www.nata.org/career-education/education/events/ilead>

**Grant:** One grant up to \$1,500 may be awarded to provide funds for travel, hotel, registration and meals for the applicant.

**Eligibility:** Any Athletic Training Student who champions inclusivity, has passion for advocacy and is interested in the mission of the LGBTQ+ AC. The applicant must also be a member of the NATA, have an NPI number and be enrolled in a professional level CAATE-accredited Athletic Training Program.

### **Application Essay Prompt and Formatting Instructions**

Please submit the entire grant application as *ONE PDF DOCUMENT*, including the following sections in this order:

- 1. Application cover sheet (See Below)**
- 2. Essay**
  - a. Why is leadership important for Athletic Trainers?
    - i. Include your goals post-graduation
    - ii. Include your current leadership experiences, skills, and goals.
  - b. How can leadership within the profession of Athletic Training help build a more inclusive profession that advocates for patients and professionals alike?
    - i. How could attending iLead, and being a student liaison to the LGBTQ+ AC, help you advocate within Athletic Training?
    - ii. Include your SMART goals for attending iLead.
  - c. Describe a barrier(s) facing Athletic Trainers today as it relates to the LGBTQ+ AC mission statement.
    - i. Example: Professional development, patient care, promotion, etc.
      1. What specific barriers do you believe you will need to face when you enter the profession and how will this experience assist you in breaking down these barriers?
  - d. Describe your financial need as it relates to attending iLead.
- 3. Letter of recommendation from your program director.**

Completed applications should be addressed to Sean Rogers and send to [sean.rogers@csun.edu](mailto:sean.rogers@csun.edu)

**Applications are due October 1<sup>st</sup>, 2018**



## **NATA LGBTQ+ Advisory Committee Evaluation Instructions and Recipient Obligations**

### **Evaluation Criteria:**

Preference will be given to applicants that emphasize inclusivity, advocacy and passion for the LGBTQ+AC's mission statement. In addition, applicants should demonstrate:

1. Need for financial support;
2. Quality of submitted materials;
3. Appropriate qualifications.

**Deadlines:** Applications for the iLead Grant will be **due on October 1<sup>st</sup>, 2018**

**Notification:** The Chair of the LGBTQ+ AC will notify awardee **by November 1<sup>st</sup>, 2018**

### **Recipient Obligations:**

The Athletic Training Student who is awarded the iLead grant will be required to complete the following obligations:

- Attend the iLead conference on January 25<sup>th</sup> – 26<sup>th</sup> 2019.
- Complete a report upon completion of the iLead conference outlining his/her/hir experience, learning, and actionable items in which his/her/hir leadership skills can contribute to the LGBTQ+AC.
- Serve as a student liaison to the LGBTQ+AC for two years until the next iLead grant recipient is chosen.
- Complete an annual report during the time as the liaison to the LGBTQ+AC.
- Collaborate with the Student Leadership Committee on any crossover projects relevant to the LGBTQ+AC's mission.
- Create LGBTQ+AC updates for dissemination in the Student Leadership Committee's Quarterly Newsletter.



## **NATA LGBTQ+ Advisory Committee iLead Grant Application Cover Sheet**

### **APPLICANT INFORMATION**

NAME: \_\_\_\_\_

NATA Student Membership Number: \_\_\_\_\_ NPI Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Expected Date of Graduation: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **PROGRAM DIRECTOR INFORMATION**

NAME: \_\_\_\_\_

NATA Membership Number: \_\_\_\_\_ NPI Number: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Institution: \_\_\_\_\_