



**EMU Athletic Training Education Program
Alumni Survey**

Name: _____

Mailing Address: _____

City, State, Zip: _____

Home Phone: _____

Cell Phone: _____

Email Address: _____

Graduation Date: _____

Current employment setting:

What degrees do you currently hold? (Please indicate institution and date)

BS/BA:	Date:
MS/MA/Med:	Date:
PhD/EdD:	Date:
Other:	Date:

What other certifications and/or licenses do you hold?

Have you taken the BOC exam? (If no, Why?)

a.	Yes	
b.	No	Why:

Do you plan on pursuing other degrees and/or certifications?

a.	No	
b.	Yes	Which ones:

How well did your educational experience at Eastern Michigan University prepare you for:

(Please use this rating scale)

1-very weak, 2-weak, 3-moderate, 4-strong, 5-very strong, NA-not applicable

Functioning in the workplace: 1 2 3 4 5

First job as an athletic trainer: 1 2 3 4 5

BOC Examination: 1 2 3 4 5

Please rate the following on a scale from 1 to 5.

1- Poor/Strongly disagree 3-Neutral 5-Excellent/Strongly agree

My skills in the prevention of athletic injuries were adequate for an entry-level position in athletic training.	1	2	3	4	5
My skills in administration were adequate for an entry-level position in athletic training.	1	2	3	4	5
My skills in the evaluation of athletic injuries were adequate for an entry-level position in athletic training.	1	2	3	4	5
My skills in first aid and emergency care were adequate for an entry-level position in athletic training.	1	2	3	4	5
My skills in therapeutic modalities were adequate for an entry-level position in athletic training.	1	2	3	4	5
My skills in rehabilitative exercise were adequate for an entry-level position in athletic training.	1	2	3	4	5

Short Answer Questions:

What item(s) or concept(s) would you recommend we need to teach the undergraduate students prior to graduation and taking the BOC exam to enhance their employability?

Do you plan to pursue Athletic Training as your profession?

- a. Yes
- b. No Why?

Other Comments and/or suggestions: