

EASTERN MICHIGN UNIVERSITY
School of Health Promotion and Human Performance

Do not submit this form unless you have declared your Major in Academic Advising in Pierce Hall

Application for Program Admission to Sports Medicine

Major Area of Concentration	Exercise Science (Mr. Shel Levine)
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NAME:		STUDENT #	
		SS#	
Campus Address:			
Campus Phone:	()		
Home Address:			
Home Phone:	()		
E-Mail Address:			
High School:			
What other Colleges/Universities have you Attended			
Major:			
Number of Transfer Hours			

What work– related experience have you had which may relate to the program admission?

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Briefly describe why you are interested in being admitted to this program.

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Why did you select Eastern Michigan University?

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I hereby apply for admission to the Athletic Training Education Program

Signature:		Date:	
Your assigned advisor is:			