

Tarleton State University
Master of Science in Athletic Training

Documentation of Clinical Observation Hours

Each applicant is required to complete a minimum of 50 observation hours with a certified and/or licensed athletic trainer. Use this form to document your hours and have your supervising athletic trainer verify your completion. If you observe more than one athletic trainer, please complete a separate form for each professional.

Applicant's name	
Supervising Athletic Trainer	
Location for observations (Facility/Address/Phone number)	

Date	Hours Completed	Activity observed (i.e. practice, treatment, rehab)

Total Hours: _____

By signing below, I verify that this is an accurate record of hours observed.

Applicant Signature: _____ Date: _____

AT signature: _____ Date: _____

AT Email: _____ AT Phone: _____