



VALLEY ATHLETIC TRAINERS ASSOCIATION

P.O. Box 720598
McAllen, Texas 78504

PRESIDENT'S HONOR ROLL

Nominations begin February 19, 2024 and must be submitted by March 8, 2024.
Please email completed form with photo to president@vatargv.org

Athletic Trainers (AT) that are members of the Valley Athletic Trainers' Association have the privilege to nominate high school senior athletic training students (ATS) to be recognized for academic honors. ATS selected for the Valley Athletic Trainers' Association Honor Roll will be presented by the supervising AT.

Nominee must fulfill the following requirements:

1. Must be a graduating senior;
2. Have an overall grade point average of 90 from grades 9th-11th and the first 6 weeks of the 12th grade;
3. Be in good standing as an ATS with the nominating high school AT; and
4. Be of good moral character.

Student Name:	School Name:
Student E-Mail:	Student Phone Number:

Nominating AT must fulfill the following requirements:

1. Be a member in good standing with VATA by January 1st, 2023; and
2. Supervise the nominated ATS regularly.

VATA Member Name:	School Name:
VATA Member E-Mail:	VATA Member Phone Number:
Signature:	Date:

CERTIFICATION OF GPA MUST BE COMPLETED BY EITHER A SCHOOL COUNSELOR OR THE SCHOOL REGISTRAR.

THIS INFORMATION IS TO CERTIFY THAT THE ATHLETIC TRAINING STUDENT LISTED ABOVE:

- ***THE INDIVIDUAL IS A 12th GRADE STUDENT AT A TEXAS SENIOR HIGH SCHOOL in the RIO GRANDE VALLEY;***
- ***THE INDIVIDUAL HAS ATTAINED AT LEAST A 90 GRADE POINT AVERAGE FROM GRADES 9th-11th & THE FIRST 6 WEEKS OF THE 12th GRADE, AND FINAL GRADE FROM AN ADVANCED PLACEMENT OR HONORS CLASS SHOULD BE GIVEN AN ADDITIONAL 10 POINTS.***
- ***CURRENT AVERAGE (ON 100 POINT SCALE) _____ PLEASE CONVERT GPA TO GRADE AVERAGE (0-100)***

<i>SCHOOL OFFICIAL'S NAME:</i>	<i>SCHOOL OFFICIAL'S TITLE</i>
<i>SIGNATURE</i>	<i>DATE</i>

I, _____, understand that the Valley Athletic Trainers Association could use my name and photo for publication (social media) and may do so at its discretion. I hereby waive all rights to this photograph or use of my name.

Date

Signature of ATS or parent/legal guardian of ATS if under 18 years of age