

APTA-Related Professional Membership

## ABPTRFE

### Part 2: To be Completed by the Applicant

## Program Information – This information can be found on the <u>ABPTRFE Online</u> <u>Directory</u>

#### **Program Structure**

Program Type: Select program type.

Program Format: Select program format.

Program Length: Enter the program length in months.

2<sup>nd</sup> Program Format: Select 2<sup>nd</sup> program format, if applicable.

2<sup>nd</sup> Program Length: Enter the 2<sup>nd</sup> program length in months, if applicable

Number of Participant Positions Each Calendar Year: Enter the number of participant positions.

#### **Program Applicant Information**

Application Deadline Date: Enter the anticipated program application deadline date.

Program Start Date: Enter the anticipated program start date.

2<sup>nd</sup> Application Deadline Date (if applicable): Enter the 2<sup>nd</sup> program application deadline date, if applicable.

**Program 2<sup>nd</sup> Start Date:** Enter the 2<sup>nd</sup> program start date, if applicable.

3<sup>rd</sup> Application Deadline Date (if applicable): Enter the 3<sup>rd</sup> program application deadline date, if applicable

**Program 3<sup>rd</sup> Start Date:** Enter the 3<sup>rd</sup> program start date, if applicable.

4<sup>th</sup> Application Deadline Date (if applicable): Enter the 4<sup>th</sup> program application deadline date, if applicable

Program 4<sup>th</sup> Start Date: Enter the 4<sup>th</sup> program start date, if applicable.

Format for Educational Hours: Select format.

Affiliated Practice Site Locations: Select locations.

Mentor Appointment to Faculty: Select appointment type.

Mentor Accessibility: Select accessibility.

### **Applicant Financial Considerations**

The applicant will consider the following related to their finances.

Participant Financial Consideration		Year One	Year Two	Year Three	Total
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# **ABPTRFE**

your employment while undergoing the program)		
License Fees	\$	

License Fees