Verret, Tori Applicant ID 9616403167

Application Status Received

University of St. Augustine - Residential Program

BIOGRAPHIC INFORMATION

PROFILE

Title: –

First Name: Tori

Middle Name: Lynn

Last Name: Verret

Suffix: –

Gender or Sex: FEMALE

Materials Under Another Name:

Nickname: –
Alternate First Name: –

No

Alternate Middle Name: –

Alternate Last Name: -

BIRTH INFORMATION

Date of Birth: 05-16-1997
City: New Iberia
County: Iberia Parish
State: Louisiana
Country: United States

CONTACT INFORMATION

Address Type: Current

Address: 2610 Anita Lois St

New Iberia, Louisiana 70560-9644

County: Iberia Parish
Country: United States

Valid Until Date:

Phone: +13373804927 Type: Mobile

+13375194095 **Type:** Mobile

Email: tverre4@lsu.edu Type: School

Address Type: Permanent

Address: 2610 Anita Lois St

New Iberia, Louisiana 70560-9644

County: Iberia Parish
Country: United States

CITIZENSHIP STATUS AND RESIDENCY INFORMATION

CITIZENSHIP STATUS

Citizenship Status: U.S. Citizen
Country of Citizenship: United States

Other Citizenship: –
Length of stay in US: –

State of Residence: Louisiana
County of Residence: Iberia Parish

Length of Residence: More than 10 years

RACE/ETHNICITY

Do you consider yourself to be of Hispanic/Latino Origin?

American Indian or Alaska Native

Answer: No Asian —

Black or African American — Native Hawaiian or other Pacific Islander —

White Yes

OTHER INFORMATION

Native Language: English

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University of St. Augustine - Residential Program

BIOGRAPHIC INFORMA	TION CONTINUED TO THE PROPERTY OF THE PROPERTY
OTHER INFORMATIO	N
Military Status: Service Branch:	Not a member of the military N/A
Does your academic reco	rd accurately reflect your capabilities? Yes
Background Information I am the firs	t generation in my family to attend college(neither my mother nor my father attended college).
Your parent's family income Answer:	me falls within the table's guidelines and you are considered to have met the criteria for economically disadvantaged: No
What is your geographic a	area? Large Town(population 10,000 to 49,999 population)
Have you ever been discipl school? Answer:	ined for student conduct violations (e.g. academic probation, dismissal, suspension, disqualification, etc.) by any college or
Have you ever been discipl school? Answer:	ined for academic performance (e.g. academic probation, dismissal, suspension, disqualification, etc.) by any college or
Have you ever been convic	
Answer:	No

Have you ever had any certification, registration, license or clinical privileges revoked, suspended or in any way restricted by an institution, state or locality?

Answer: No

ACADEMIC HISTORY

STANDARDIZED TESTS

UNOFFICIAL GRE

ETS Registration Code Quantitative **Analytical Writing** Date Verbal 07-21-2018 3579638 145 27% 153 50% 3.0 17%

COLLEGES ATTENDED

002010 LOUISIANA STATE UNIVERSITY - A & M COLLEGE - BATON ROUGE

Start Date: 08-2015 Still Current: Yes End Date: Current Primary: Yes State: Louisiana Regionally Accredited: Yes

> Accredited By: Southern Association of Colleges and

Schools, Commission on Colleges

Major 2nd Major/Minor Status Degree Verified Degree Name Degree Date **Athletic Training** -/None Degree Expected No **Bachelor of Science** 05-2019

002031 UNIVERSITY OF LOUISIANA - LAFAYETTE

Start Date: 01-2013 Still Current: No **End Date:** 07-2018 Primary: No State: Louisiana Regionally Accredited:

> Accredited By: Southern Association of Colleges and

Schools, Commission on Colleges

Major 2nd Major/Minor Status Degree Verified Degree Name Degree Date

No Degree Defined

SUPPORTING INFORMATION

EXPERIENCI

VOLUNTEER/COMMUNITY ENRICHMENT TOTAL HOURS: 1929

Experience Type: Volunteer

Recognition Type: Received Academic Credit

Title: Football Student Athletic Trainer

Employer: LSU Athletic Training

Louisiana United States

Supervisor: Jack Marucci

Director of Athletic Training

+12255782451 jmarucc@lsu.edu

Experience Dates: 08-01-2018/ Current

Status: Full-time

Hours per Week: 63
Total Weeks: 4
Total Hours: 252

Experience Details: Assisted in treatment, rehabilitation, and

practice/game coverage

Proficient in manual therapies, including: cupping, Graston (level 1), myofascial release, and joint mobilizations

Proficient in C3 Logic Testing and assisted with current FDA research through LSU Assisted in rehabilitation regimes that included: Blood Flow Restriction (BFR),

and Dry Needling

Traveled to all home and away contests and assisted with all travel logistics Responsible for overseeing the packing of all sports medicine equipment used for contests Mentored younger athletic

training students

Permit to Contact: Yes

Experience Type: Volunteer

Recognition Type: Received Academic Credit

Title: Softball Student Athletic Trainer

Employer: LSU Athletic Training

Louisiana United States

Supervisor: Pamela Workman

Associate Athletic Trainer

+12259553080 pworkman@lsu.edu Experience Dates: 08-01-2017/05-26-2018

Status: Full-time Hours per Week: 20

Total Weeks: 39
Total Hours: 780

Experience Details: Assisted in treatment, rehabilitation, and

practice/game coverage

Responsible for overseeing status of

emergency equipment

Assisted in packing and travel logistics Mentored younger athletic training

students and pre-professional students at

the clinical site

Proficient in C3 Logic Testing and assisted with current FDA research through LSU Assisted in rehabilitation regimes that included: Blood Flow Restriction (BFR),

and Dry Needling

Permit to Contact: Yes

TOTAL HOURS: 1929

University of St. Augustine - Residential Program

VOLUNTEER/COMMUNITY ENRICHMENT

SUPPORTING INFORMATION CONTINUED

08-01-2016/05-05-2017 Experience Type: **Experience Dates:** Volunteer

Full-time Recognition Type: Status: Received Academic Credit

Hours per Week: 23 Title: Track and Field Student Athletic Trainer

Total Weeks: 39 Employer: LSU Athletic Training

Total Hours: Louisiana **United States**

Experience Details: Assisted in treatment, rehabilitation, and Supervisor:

practice/meet coverage CJ Walker Proficient in C3 Logic Testing and assisted

Assistant Athletic trainer with current FDA research through LSU +12258196293

Permit to Contact: ciwalker@lsu.edu

SCHOLARSHIPS

Name: LGA Scholarship Description:

Organization: Louisiana Gas Association Given to undergraduate student based on the student's resume,

community service, and GPA. Date: 08-21-2018

SCHOLARSHIPS

Name: Don D. Jordan Scholarship Description:

Organization: CenterPoint Energy Awarded to legal dependents of CenterPoint Energy employees and

Retirees to recognize outstanding community service 04-29-2018 Date:

One meaningful experience that impacted my life was getting the opportunity to work in the Athletic Training program at LSU. By being a part of this program, I have had the opportunity to work with LSU's track and field, softball, and football team. Working with these different teams has allowed me to grow as a person by showing me that not everything comes easy, but if I set my goals I can accomplish them. When I first started the program, I knew that my ultimate goal was to get into physical therapy school instead of becoming an athletic trainer. Since I knew what my goal was I knew that by entering the athletic training program I would be doing hours and hours of extra work that wasn't necessarily required for me to get into physical therapy school. Now as a senior in college and a third year in the program I have realized how much I have learned about the rehabilitation process and how to care for different people in order to get them back to their normal life.

In addition, working with three different teams came working with a number of different people and personalities. Working with these different personalities has allowed me to figure out how to communicate effectively to accomplish a common goal, such as returning an athlete to play. There were multiple occasions where I had to work with an athlete that the athlete had a negative attitude towards what was going on in their rehab process and I had to be the one to talk to them and remind them of the goal that was set. I had to find a way to get them to look at the positives and help them 'find the light at the end of the tunnel' so that they could return to the level of play that they were playing at or even better. Working in LSU's Athletic Training program has helped me get the opportunity to help to do something I love, which is helping other people return

to their everyday life. It has also taught me about myself and helped me find skills that I didn't know I had, such as being able to set a goal and work towards it or communicating in an effective way to others in order to motivate them.

5

Certification Number:

Organization:

State:

Title: Basic Life Support for Healthcare Issue Date: 04-12-2018

Providers Valid Until: 04-12-2020

Description:

Certifications Type:

Louisiana

American Red Cross

Verret, Tori Applicant ID 9616403167

Application Status Received

University of St. Augustine - Residential Program

SUPPORTING INFORMATION CONTINUED

LICENSES AND CERTIFICATIONS						
Туре	Document Requested	Uploaded	File Name	Uploaded Date		
Certifications	Basic Life Support for Healthcare Providers	Yes	Certifications	07-22-2018		



American Red Cross
Certificate of Completion
Tori Verret
has successfully completed requirements for
First Aid - Valid 2 Years
Basic Life Support for Healthcame Provides - Valid 2 Years'
conducted by
American Red Cross
Date Completed: Thu Apr 12 2018
Instructors: "Raiph Castle"



To verify, scan code or visit: https://www.redcross.org/on/demandware.store/Sites-RedCross-Site/default/Certificates-ViewAndPrint?certnumber-GVY3SO&selectedCerts-id-GVY3SO

SUPPORTING INFORMATION CONTINUED

OBSERVATION HOURS

IBERIA MEDICAL REHAB CENTER

Facility Address: 500 N. Lewis St. Suite 110

New Iberia Louisiana 70563 United States Experience Dates:

06-01-2016/07-31-2018

Recognition Type:

Paid

Status: Completed PT Also Evaluator: Yes

Verification Status:VerifiedSignature Type:Electronic Signature

Settings and Hours of Experience	HRS Completed	HRS Planned/IP
INPATIENT Settings		
Acute Care Hospital	100	0
Nursing Home/Skilled Nursing Facility/Extended Care Facility	0	0
Other Inpatient Facility	0	0
Rehabilitation/Sub-acute Rehabilitation	0	0
OUTPATIENT Settings		
Free-standing PT or Hospital Clinic	334	0
Home Health	0	0
Industrial/Occupational Health	0	0
Other Outpatient Facility	0	0
School/Pre-school	0	0
Wellness/Prevention/Fitness	0	0
Total Hours for All Settings	434	0
D 11 1 10 1 11 11 11 11 11 11 11 11 11 11		

Patient Diagnoses/Populations Observed

General Orthopedic (musculoskeletal)

Neurological (neuromuscular)

Sports

PT Supervisor

 Name:
 Jacob Freyou

 Phone:
 +13373391062

Email: jfreyou@iberiamedicalcenter.com

License Number: License State: 03641 Louisiana

DOCUMENTS

Document Requested Uploaded File Name Uploaded Date

CUSTOM QUESTIONS

PTA EDUCATION

* 1. Have you graduated from a CAPTE-accredited physical therapist assistant (PTA) program?

Answer: No

PREVIOUS PHYSICAL THERAPIST EDUCATION

* 1. Have you previously enrolled in a professional physical therapist (PT) program? If yes, you MUST list the institution in the Colleges Attended section of the application, enter all attempted and completed PT courses in the Transcript Entry section of the application and have an official transcript sent to PTCAS. Failure to report this institution and associated coursework may jeopardize your application.

Answer: No

GENDER IDENTITY

* 1. How do you describe your current gender identity?

Answer: Female/Woman

PTCAS CERTIFICATION AND AUTHORIZATION STATEMENT

* 1. I certify, as required in the application, that I have read and understand all application instructions, including the provisions which note that I am responsible for monitoring and ensuring the progress of my application.

I certify that I have read and will abide by all program-specific instructions for my designated physical therapist programs. I certify that I have read and understand the American Council of Academic Physical Therapy (ACAPT) Admissions Traffic Rules for Applicants.

I certify that all the information and statements I have provided in this application are current, correct, and complete to the best of my knowledge.

I certify that my personal essay and the information on my application represent my own work.

I understand that withholding information requested on the PTCAS application, or giving false information, may be grounds for denial of admission to a program participating in PTCAS or may be grounds for expulsion from the institution after I have been admitted.

I acknowledge that a program that makes an offer of acceptance to me will also know the number of offers I have received and accepted at other programs in PTCAS. While the admissions cycle is open, my designated programs will not know the total number of programs I selected on the application or other (non-acceptance) admission decisions made by other programs in PTCAS.

I acknowledge that if I start classes at a PT program, my other designated programs in which my application is still under consideration will be able to view matriculation status, if reported to PTCAS.

I acknowledge that in October after the end of the PTCAS admissions cycle, only my designated programs will be able to view to what other programs I applied via PTCAS and the final admission decision reported by each program.

I agree, understand and consent to PTCAS and the American Physical Therapy Association (APTA) releasing my de-identified application data that does not contain personally identifiable information, as set forth in the PTCAS privacy statement, and admission decisions submitted to PTCAS by my designated PT programs to third party health and education organizations for educational research purposes (including surveys). Such educational research is conducted for the purpose of improving PT education and admissions.

I acknowledge and agree that my sole remedy in the event of any proven errors or omissions related to the handling or processing of my application by PTCAS is to obtain a refund of my PTCAS application fee.

Answer: Indicate your understanding and acceptance of the terms described above by checking this box. Your certification of this statement serves the same purpose as a legal signature, and is binding.

Verret, Tori Applicant ID 9616403167

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University of St. Augustine - Residential Program

DESIGNATIONS

DOCTOR OF PHYSICAL THERAPY - RESIDENTIAL (ST. AUGUSTINE CAMPUS)

Organization: University of St. Augustine - Residential

Program

Department: Program Level: -

Enrollment: Fall 2019

Campus: -

Program Start Date: 09/09/2019

Submitted Date: 09-05-2018

Completed Date: –
Verified Date: –

Application Status: Received

Academic Update Status: -

Last Updated: 09-05-2018

SUPPLEMENTAL QUESTIONS

RE-APPLICANT QUESTIONS

1 Have you previously applied to this education program?

Answer: No

2 If you are reapplying to this program, how have you strengthened your application?

Answer: not applicable

CAMPUS AND TERM

1 Applicants are allowed only one application to be reviewed by Admissions. Please select one campus and term.

Answer: St. Augustine, FL - Fall 2019

SECONDARY CAMPUS CHOICE

* 1 Should your campus choice reach capacity, are you open to attending a different USAHS location?

Answer: Austin, TX

AGREEING TO TERMS OF APPLICATION

By selecting "I Agree" you are acknowledging that you understand (1) only one application is allowed to be evaluated, (2) after submission through PTCAS you must follow through with an Enrollment Advisor to have your application reviewed as your application is not submitted automatically and (3) you have completed our required one-page online supplemental form. For

any questions, please email us at enroll@usa.edu.

Answer: I Agree

DOCUMENTS

1

Document Requested	Uploaded	File Name	Uploaded Date
Other	Yes	Other	09-05-2018
Other	Yes	Other	09-05-2018

Statement of Purpose

Physical Therapy School

It has been a lifelong dream of mine to become a physical therapist. Growing up, I played multiple sports and suffered multiple injuries that I had to get rehab for and found an interest in the rehab process. This interest has now led me to pursuing a degree in Athletic Training from LSU and working at Iberia Medical Center's outpatient rehab clinic. After working in the outpatient rehab clinic, I was then given the opportunity to work in the hospital as a part of the Inpatient rehab services. Getting the opportunity to work in settings that covered athletes only, outpatient rehab, and inpatient rehab has really confirmed my aspirations to become a physical therapist.

Many people ask me why I don't finish my degree in Athletic Training and become an athletic trainer. My answer to them is because although I love sports and sports are a big part of my life, I want to be able to work with everyone and help everyone, and not just the athletic population. Another question I get asked often is why I am spending so much time doing Athletic Training in school if I want to go into Physical Therapy. My answer to this question is because by being a part of the athletic training program at a large university like LSU I get the opportunity to not only take athletes through the rehab process, but I also get to assist in writing rehab programs and I get to learn and understand the rehab process.

After graduation, I plan to first work at a hospital, such as Iberia Medical Center, with an inpatient and outpatient facility. After working at a hospital, I hope to get the opportunity to work at TIRR Memorial Hermann inpatient hospital. Eventually, I would like to open up my own physical therapy clinic and build my own business that focuses on the rehabilitation of all sorts of orthopedic and brain injuries.

TORI L. VERRET

2610 Anita Lois Rd. New Iberia, LA. tverre4@lsu.edu · (337) 519-4095

EDUCATION

LOUISIANA STATE UNIVERSITY; BATON ROUGE, LA

Bachelor of Science, Athletic Training – Anticipated May 2019

GPA: 3.5

GRE: Verbal - 145, Quantitative - 153, Writing – 3.0

ATHLETIC TRAINING EXPERIENCE

FALL 2018 - SPRING 2019

LSU FOOTBALL, ATHLETIC TRAINING STUDENT

Assisted in treatment, rehabilitation, and practice/game coverage

Proficient in manual therapies, including: cupping, Graston (level 1), myofascial release, and joint mobilizations

Proficient in C3 Logic Testing and assisted with current FDA research through LSU

Assisted in rehabilitation regimes that included: Blood Flow Restriction (BFR), and Dry

Needling

Traveled to all home and away contests and assisted with all travel logistics

Responsible for overseeing the packing of all sports medicine equipment used for contests

Clinical assignment to defensive back position group

Mentored younger athletic training students and pre-professional students at the clinical site

FALL 2017 – SPRING 2018

LSU Softball, ATHLETIC TRAINING STUDENT

Assisted in treatment, rehabilitation, and practice/game coverage

Responsible for overseeing status of emergency equipment

Assisted in packing and travel logistics

Mentored younger athletic training students and pre-professional students at the clinical site

Proficient in C3 Logic Testing and assisted with current FDA research through LSU

Assisted in rehabilitation regimes that included: Blood Flow Restriction (BFR), and Dry

Needling

FALL 2018 – SPRING 2019

LSU Track and Field, ATHLETIC TRAINING STUDENT

Assisted in treatment, rehabilitation, and practice/meet coverage

Proficient in C3 Logic Testing and assisted with current FDA research through LSU

RELATED WORK EXPERIENCE

AUGUST 2017, FEBRUARY 2018

TIGER SPORTS CAMPS; BATON ROUGE, LA

Supervised youth camps for LSU softball and baseball

Acted as a first aid respondent and provided proper hydration for 200+ campers

JUNE 2016- PRESENT

IBERIA MEDICAL REHAB CENTER; NEW IBERIA, LA

Assisted patients with rehab exercises Assisted in setting patients up on various modalities

CERTIFICATIONS/MEMBERSHIPS

National Athletic Trainers' Association (Fall 2017 – Present)

LSU Athletic Training Student Organization (Fall 2015 – Present)

American Red Cross Basic Life Support and First Aid (May 2014 – Present)

Graston Technique M1 Training - certification upon graduation (Nov. 2017)

AWARDS

Don D. Jordan Scholarship (May 2018)

Awarded to legal dependents of CenterPoint Energy employees and Retirees to recognize outstanding community service

Louisiana Gas Association Scholarship (August 2018)

Given to undergraduate student based on the student's resume, community service, and GPA.

LSU Dean's List (Fall 2016, Fall 2017, Spring 2016, Spring 2017)

Undergraduate students that are enrolled in at least 15 hours and obtain a 3.5 - 3.9 GPA.

COMMUNITY SERVICE

Geaux Teal Ovarian Cancer Awareness (Spring 2018)

Fundraising and promoting ovarian cancer awareness and education.

Alpha Tau Sigma: Athletic Training Honors Society (Fall 2016 – Present)

Involved in "Be the Match" partnership, which aids the National Bone Marrow Donor Registry through registration drives and raising awareness on campus

References

.....

Jack Marucci, MS, LAT, ATC

Director of Athletic Training Louisiana State University 225-268-1697 jmarucc@lsu.edu

Pamela Workman, MS, LAT, ATC

Associate Athletic Trainer Louisiana State University 225-955-3080 pworkman@lsu.edu

CJ Walker, MS, LAT, ATC

Assistant Athletic Trainer Louisiana State University 225-819-6293 cjwalker@lsu.edu

JACOB FREYOU, PT

Physical Therapy Director Iberia Medical Center 337-339-1062 ifreyou@iberiamedicalcenter.com

AMANDA BENSON, PhD, LAT, ATC

Assistant Athletic Training Program Director Louisiana State University (225) 578-3549 abenson@lsu.edu

RAY CASTLE, PhD, LAT, ATC

Athletic Training Program Director Louisiana State University (225) 445-0460 rcastl1@lsu.edu

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Application Status Received

University of St. Augustine - Residential Program

ADVISOR RELEASE STATEMENT

By answering Yes, you authorize PTCAS to release selected information regarding your PTCAS application and admission status to the health professions advisor and the health professions advisory committee of the post-secondary institution(s) that you have attended. By releasing your information, your advisor is better able to assist you in the admissions process, as well as better guide other students in the future. You cannot make changes to this item after you submit your application to PTCAS.

Advisor Release Statement Answer: Yes

Verret, Tori Applicant ID 9616403167

Application Status Received

University of St. Augustine - Residential Program

PRESUBMISSION RELEASE

By answering Yes, you authorize PTCAS to release your name and contact information to your designated programs BEFORE you submit your final application. This will allow your designated programs to send you important information about the local admissions process before you complete your application.

Presubmission Release Answer: Yes

University of St. Augustine - Residential Program

EVALUATIONS							
EVALUATOR INFORMATION							
Jacob Freyou							
Title: Diector of Rehab Services Occupation: Physical Therapist Organization: Iberia Medical Center Email: jfreyou@iberiamedicalcen	ter.com	Daytime Phone: Date Completed: Status:	337-369-3322 : 08/07/2018 Completed				
I waive my right of access to this evaluation:	YES						
How long have you known the applicant?	2-3 years						
Are you a licensed Physical Therapist?	Yes						
How well do you know the applicant?	Moderately						
If you are a physical therapist, please indicate the physical therapy institution from which you graduated	LSU medical						
Select the role that best describes your primary interaction with the applicant:	Supervisor/Employer						
If you are a physical therapist, please indicate in which state you are licensed	Louisiana						
If you selected "Professor" or "Professor in Major"; above, list all courses in which you have had the applicant (for example: Intro to Chemistry, Chem 101)	_						
If you are a physical therapist, please enter your PT licensure number.	03641						
Approximately how many references do you submit on behalf of physical therapy applicants each year?	1-2						
REFERENCE RATINGS							
			oor Below (1) Average (2)	Average (3)	Good (4)	Excellent (5)	
Commitment to Learning					~		
Critical Thinking					~		
Empathy						~	
Ethics					~		
Interpersonal Skills					•		
Leadership					•		
Oral Communication						•	
Professional Demeanor						•	
Response to Criticism		~					
Responsibility						•	
Stress Management					•		
Team Skills						•	
Time Management					•		
Written Communication 🗸							
RECOMMENDATION CONCERNING ADMISSION							
I highly recommend this applicant							

To whom it may concern:

I have had the pleasure of employing Tori Verret for the last few years as a Rehab Technician. She has been an asset to our team. She communicates well with patients and is a team player. I have no reservations in recommending her as a PT school applicant. She is reliable and hardworking, and all enjoy working with her. I am less familiar with her grades and other experiences but from a clinical, and patient care stand point her skills are excellent.

Jacob Freyou, PT Director of Rehab Iberia Medical Center.

SVALUATIONS CONTINUED								
EVALUATIONS CONTINUED EVALUATOR INFORMATION								
Vince Dubois			_	_	_	_	_	
Title: Occupation: Organization: Email:	Physical Therapist Physical Therapist Iberia Medical Center - Rehadubois9802@AOL.com	ab Center	Daytime Phor Date Complet Status:		3375770785 08/23/2018 Completed			
I waive my right (of access to this evaluation:	YES						
	ed Physical Therapist?	Yes						
	ou known the applicant?	More than 10 years						
If you are a physi	ical therapist, please sical therapy institution	LSU Medical Center in Ne	w Orleans					
How well do you	know the applicant?	Very Well						
	ical therapist, please o state you are licensed	Louisiana						
	nat best describes your ion with the applicant:	Supervisor/Employer						
If you are a physi your PT licensure	ical therapist, please enter e number.	02641						
Major"; above, lis	Professor" or "Professor in st all courses in which you olicant (for example: Intro nem 101)	_						
	ow many references do ehalf of physical therapy year?	1						
REFERENCE R	ATINGS							
			Not Observed	Poor (1)	Below Average (2)	Average (3)	Good (4)	Excellent (5)
Commitment to	Learning							✓
Critical Thinking	;							•
Empathy								•
Ethics								•
Interpersonal Sk	ills							•
Leadership								~
Oral Communica								•
Professional Der								•
Response to Crit	ticism							•
Responsibility	.aut							<u> </u>
Stress Managem Team Skills	lent							۷
Time Manageme	ent .							J
Written Communication					·			
RECOMMENDATION CONCERNING ADMISSION								
	mend this applicant							

Dear Admissions Board:

It is with great pleasure that I recommend Tori Verret to be admitted to your program. I have known Tori since she was a kid. She has always had a "can do" attitude. Her passion and willingness to help others is evident in everything that she does.

Tori has worked under my supervision at Iberia Medical Center Rehab Center in New Iberia, LA since the summer of 2016. She continues to work holidays and every summer. Our staff, as well as, our patients enjoy her pleasant disposition. Her work ethic is second to none. Tori is eager to learn and ready to tackle any challenge that awaits her.

In addition to working over the holidays and summers, Tori is a member of the athletic training program at Louisiana State University – Baton Rouge. She has assisted with track and field and softball. She will be working with the athletic trainers this fall for football season. Tori is a very involved young lady and still manages to maintain an "A" average.

It is without hesitation that I make this recommendation for Tori Verret. She would be an excellent asset to the physical therapy profession and I would be honored to one day work alongside her.

Sincerely,

Vince Dubois Physical Therapist

University of St. Augustine - Residential Program

EVALUATIONS CONTINUED						
EVALUATOR INFORMATION						
Amanda Benson						
Title: — Occupation: — Organization: — Email: abenson@lsu.edu		Daytime Phone: Date Completed Status:	225-578-3549 : 08/09/2018 Completed			
I waive my right of access to this evaluation:	YES					
Are you a licensed Physical Therapist?	No					
How long have you known the applicant?	2-3 years					
If you are a physical therapist, please indicate the physical therapy institution from which you graduated	_					
How well do you know the applicant?	Moderately					
If you are a physical therapist, please indicate in which state you are licensed	_					
Select the role that best describes your primary interaction with the applicant:	Professor in Major					
If you are a physical therapist, please enter your PT licensure number.	_					
If you selected "Professor" or "Professor in Major"; above, list all courses in which you have had the applicant (for example: Intro to Chemistry, Chem 101)	ATRN 3505, 2505, 2001					
Approximately how many references do you submit on behalf of physical therapy applicants each year?	2					
REFERENCE RATINGS						
			Poor Below (1) Average (2)	Average (3)	Good (4)	Excellent (5)
Commitment to Learning					~	
Critical Thinking					~	
Empathy				~		
Ethics					•	
Interpersonal Skills				~		
Leadership					•	
Oral Communication				~		
Professional Demeanor					•	
Response to Criticism					~	
Responsibility					•	
Stress Management		•				
Team Skills					•	
Time Management					•	
Written Communication					~	
RECOMMENDATION CONCERNING AD	OMISSION					
I highly recommend this applicant						

To Whom it May Concern:

Please accept this letter as my support for Tori Verret's pursuit of your academic program. Tori has been a student of mine for the past 2 years within the Athletic Training Program at Louisiana State University.

Tori is a very talented your lady who has been very diligent student in my experiences with her. As you can see by her resume she has received several academic accolades including maintaining a 3.5 GPA here at LSU. Being an Athletic Training student at LSU is extremely difficult. As part of Tori's education she is responsible for completing clinical rotations that are above and beyond her normal course work. On average this year Tori was in the clinical setting with LSU softball 25-35 hours per week. Tori's evaluations reflect her hard work, dedication and overall academic strength as a student.

Clinically Tori is outstanding and has quickly emerged herself in her clinical rotations. Perhaps one of her best attributes is her "common sense" approach when dealing with athletes, parents and coaches. Her evaluation skills are among the best in her class and once she experiences an injury, she remembers it and utilizes that knowledge in the future. As simple as this may sound, it is very impressive when you watch her apply the knowledge to various situations. Academically Tori works very hard and is among the best student in her class. She also has the ability to think critically and perform logically with little to no guidance.

In the future I feel that Tori will thrive and be an excellent addition to the Allied Healthcare Profession. She is not afraid to work, and she has a great understanding of the allied health care professions. She is a pleasure to teach and a joy to work with. It is without reservation that I recommend her for yourprogram. If you have any questions regarding Tori, please feel free to contact me at 225-578-3549 or at abenson@lsu.edu.

Kind Regards-

Amanda Benson Amanda Benson PhD, LAT, ATC Assistant Program Director Athletic Training