

**MRA Application
Preliminary Areas of Investigation**

Please submit this template to mra.application@gmail.com. The individual listed as Primary contact person will be notified that the application has been received.

Primary contact person
Email address

Sponsoring Organization

What is the mission and vision of your credentialing program/organization?

Eligibility

Describe the eligibility requirements for your certification examination?

Education

Do you accredit education programs leading to certification examination eligibility? If yes, please include your standards and accreditation process.

Are your athletic training/therapy education programs recognized by government? If yes, please indicate which level of government and the type of recognition. (e.g., Academic recognition)

List the curricula or coursework required of candidates for your examination?

* Curriculum must meet the minimum theoretical and applied knowledge in the following areas:

- Risk Management and Injury Prevention (including environmental care)
- Acute Care (urgent and non-urgent interventions)
- Pathology of Injuries and Illnesses
- Orthopedic Clinical Examination and Diagnosis/Assessment (extremities and spine)
- General Medical Conditions Examination and Diagnosis Medical Conditions & Disabilities
- Human Anatomy & Physiology,
- Exercise physiology
- Kinesiology/biomechanics
- Therapeutic Modalities (sample list of modalities)
- Rehabilitation and Conditioning Techniques (extremities and spine, including manual therapies)
- Psychosocial Intervention and Referral
- Professional Responsibilities and Ethical Practice
- Research and Evidence Informed Practice
- Pharmacology, drugs and ergogenic aids (therapeutic and performance enhancing)
- Nutrition
- Health Care Administration and Management (business principles – knowledge of local rules and healthcare system)

Regulatory Authority

Are you a National Organization regulating the profession of Athletic Training or Therapy (or related professional title)? If no, what jurisdiction do you represent?

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Is your organization the only organization that regulates the profession of Athletic Training and Therapy (or related professional title) in your country? If no, please give details.

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Do you have statutory authority over the professional of Athletic Training and Therapy (or regulated professional title)?

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Professional Conduct and Discipline

Attach a copy of your Standards of Professional Practice/Code of Ethics or Code of Conduct for certified individuals.

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Do you have a disciplinary process? If yes, please attach a document describing the process.

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Are disciplinary actions reported publicly? If so, indicate where they can be found.

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Assessment Tools/Psychometrics

Attach a copy of your exam blueprint/job analysis/role delineation study

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What psychometric tools are used to determine the reliability and validity of your examination?

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Are there knowledge and skill sets that are unique to your jurisdictions that would require interested candidates to take further training if they expect to be successful with the certification process in your country?

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Accessibility to Examinations

Are the resources and exam formats of your organization able to accommodate the potential for an increased numbers of candidates? If yes, how many extra candidates do you think you could accommodate annually?

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Continuing Competence

What are the requirements and guidelines for ensuring continuing competence (e.g., continuing education requirements)?

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What are the immigration issues that candidates would need to know?

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What issues relate to the issuance of a work visa?

Are there jurisdictional guidelines between provinces, states or regions that limit the portability of the credential within your country?