**NHF PT SCHOLARSHIP APPLICATION RUBRIC 2019**

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| **CRITERIA** | **No** | **Yes**  |
| **Application** | Not submitted on time and/or incomplete - DO NOT PROCEED | Submitted on time and complete - PROCEED |
| **PT/PTA License** | Not active or not in good standing in the US or US Territory - DO NOT PROCEED | Active and in good standing in the US or US Territory - PROCEED |
| **CRITERIA** | **0** | **1** | **2** | **3** | **4** | **Score** |
| **Financial need** | Has full funding from other sources |  | Has ~ 2/3 funding from another source | Has ~ 1/3 funding from another source | Has no funding from another source |  |
| **Funding effort** | Has not requested funding from any source |  | Has requested funding from 1 source |  | Has requested funding from 2 or more sources |   |
| **Bleeding Disorder knowledge** | No knowledge | Expert level knowledge (ex: published) | Advanced level knowledge (ex: teaching peers) | Intermediate level knowledge (ex: attended Adv PT Partners) | Basic level knowledge (ex: self taught, Basic PT Partners) |   |
| **Bleeding Disorder clinical experience** | Not currently providing care or <1 yr clinical experience with BD | >5 years and > 20 hrs/mo | > 5 years and <20 hrs/mo | 1-5 years and >20 hrs/mo | 1-5 years and <20 hrs/mo |   |
| **PERSONAL STATEMENT: Professional strengths related to the bleeding disorders community** | Does not state current professional strengths  | States one professional strength in general terms | States more than one professional strength in general terms | Clearly states one specific professional strength related to the care of people with bleeding disorders | Clearly states more than one specific professional strength related to the care of people with bleeding disorders |  |
| **PERSONAL STATEMENT: PT skill acquisition goal** | Does not state PT skill acquisition goal | States one general knowledge or skill acquisition goal | States more than one general knowledge or skill acquisition goal | Clearly states one specific knowledge or skill acquisition goal related to the care of people with bleeding disorders | Clearly states more than one specific knowledge or skill acquisition goal related to the care of people with bleeding disorders |  |
| **PERSONAL STATEMENT:****PT program enhancement goal** | Does not state PT program enhancement goal | States one general PT program enhancement goal | States more than one general PT program enhancement goal | Clearly states one specific PT program enhancement goal related to the care of people with bleeding disorders | Clearly states more than one specific PT program enhancement goal related to the care of people with bleeding disorders |   |
| **PERSONAL STATEMENT:****Other goal for participation in NHFBDC** | Does not state any other goal | State on general other goal | States more than one general other goal | Clearly states one specific other goal related to the care of people with bleeding disorders | Clearly states more than one specific other goal related to the care of people with bleeding disorders |   |
| **TOTAL SCORE** |  **/32** |