



South Carolina Athletic Trainer Application Renewal Form

Current BOC **not** required for renewal

SC Number	BOC Certification Number	Last 4 numbers of SSN	Date of Birth (mm/dd/yyyy)
Last Name	First Name		Middle Initial
Address (Your ID badge will be mailed here)			
City, State and Zip			
Contact Phone Number With Area Code	Email Address		
Affiliated School/Hospital/Clinic/Other	Contact Phone number		

Renewal applications for South Carolina Athletic Trainer Certification must submit the following attachments along with this form:

1. Attach a photocopy of your current **CPR card**.
2. Attach photocopies of your **two (2) DHEC CEU cards** from the yearly SCATA Meeting (*Any other CEUs **must be pre-approved** by SC Athletic Trainer Advisory Board Designee, Kevin Ennis, prior to submitting your renewal application at kevin.ennis@rocketmail.com or call 843-838-5907*).
3. Enclose a **check or money order for \$40.00** made payable to: **SC DHEC** (Credit cards are not accepted at this time.) **In addition**, a **late fee** of fifteen dollars (\$15.00 for a total of \$55.00) must be included if all renewal materials are not received prior to your current expiration date. A **restoration fee** of one hundred dollars (\$100.00 for a total of \$140.00) must be included for failure to renew within six months of your current expiration date. **A \$20.00 late fee will be assessed for returned checks.**
4. **Please email a photo for your ID badge to atcerts@dhec.sc.gov**, if you have not already. Photo should be head & shoulders, no hats or sunglasses.

Incomplete applications will not be processed.

Please complete the Athletic Trainer Application Form in its entirety, enclose all fees & required documentations and MAIL (please do not email) to:

DHEC EMS
Athletic Trainer Program
2600 Bull St.
Columbia, SC 29201

Your signature and date signed (Must be original signature)