Financial Fact Sheet 2023-2024



Introduction: The American Board of Physical Therapy Residency and Fellowship Education (ABPTRFE) has created this Financial Fact Sheet to provide financial transparency to applicants on the true costs to undergo residency and fellowship education.

Instructions: The program will complete Part 1 of this form and publish it on the program's website. The applicant will complete Part 2 of this form.

Part 1: To be Completed by the Program

Program Information

Program Information

Name of Program: Cleveland Clinic Sports Physical Therapy Residency

Physical Address: 5555 Transportation Blvd., Garfield Heights, OH 44125

Program Hours

Educational Hours: 250+.

Patient-Care Clinic / Practice Hours (inclusive of mentoring): 2000

Mentoring Hours: 200

Program Travel

Please indicate if participants are required to travel greater than 50 miles for any aspect of patient-care clinic/practice hours (does not include daily commute): No

Please indicate if participants are required to travel greater than 50 miles for any aspect of educational hours: No

Participant Costs

The program will provide all costs associated with this program.

Type of Cost	Year One	Year Two	Year Three	Total
Fees Enter the amount of fees associated with the program (if applicable). Fees are any amount \$1,000 or less. If more than \$1,000, please enter that amount under tuition.	\$ O	\$0	\$ O	\$ O
 □ Fees for this program include: □ CPR □ EMR 				



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APTA-Related Professional Membership				
☑ Dues (APTA, Section/Academy)				
Other Professional Membership Dues				
Other: Indicate other fees.				
Tuition (if applicable)	\$0	\$0	\$ NA	\$0
Curriculum Costs (not included in tuition above)	\$ O	\$ O	\$ NA	\$ 0
Required textbooks, software, apps (not included in program fees)	\$ O	\$ O	\$ NA	\$ 0
Application Fees (program assessed above and beyond RF-PTCAS)	\$ O	\$ O	\$ NA	\$ 0
Conference Registration Fees (not included in fees above)	\$ O	\$ O	\$ NA	\$ 0
Travel Costs (for program education requirements and conference attendance, if applicable)	\$ O	\$ 0	\$ NA	\$ O
Parking/Mass-Transit Fees	\$0	\$0	\$ NA	\$0
Mentoring Fees	\$0	\$0	\$ NA	\$0
Malpractice Insurance	\$ O	\$ O	\$ NA	\$ O
Other program costs not included above: List other costs.	\$0	\$0	\$ NA	\$ 0
Total Program Costs	\$0	\$ 0	\$ NA	\$ 0

Program Sponsored Financial Assistance

The program will provide any financial assistance provided to participants.

Type of Financial Assistance	Year One	Year Two	Year Three	Total
Salary Paid by Program	\$ 100% new grad salary, varies by year	\$ 100% new grad salary, varies by year	\$ NA	\$ 100% new grad salary, varies by year
Student Financial Aid (for tuition fee programs only)	\$ NA	\$ NA	\$ NA	\$ NA
Graduate Assistantship(s)	\$ NA	\$ NA	\$ NA	\$ NA
Other Assistantship(s)	\$ NA	\$ NA	\$ NA	\$ NA
Scholarships	\$ NA	\$ NA	\$ NA	\$ NA
Travel Costs/Stipends	\$0	\$0	\$0	\$0
Student Financial Aid (for tuition fee programs only)	\$ NA	\$ NA	\$ NA	\$ NA
ABPTS Board-Certification Examination Fees	\$ O	\$0	\$ O	\$0
Other financial assistance not included above: Yes	\$ Budget Dependent	\$ Budget Dependent	\$ NA	\$ Budget Dependent
Total Financial Assistance	\$ 100% new grad salary, plus budget dependent cont ed' allotment	\$ 100% new grad salary, plus budget dependent cont ed' allotment	\$ NA	\$ 100% new grad salary, plus budget dependent cont ed' allotment.