NSP Education Program

SENIOR CANDIDATE APPLICATION

(Submit to Patrol Representative who emails completed application to education@nsp.org )

Date of Senior Candidate Application

**PATROLLER INFORMATION**

|  |  |
| --- | --- |
| Name | NSP ID # |
| Address  City      State      Zip  Email Address: | Daytime Phone    Evening/Weekend Phone |
| Patrol | Years of Patrolling Experience |

Senior Candidate (Signature)      Date

Senior Alpine Senior Nordic Senior Patroller

**DIVISION APPLICATION INFORMATION *(To be filled out by candidate)***

|  |
| --- |
| Include senior course(s) that have been taken and course(s) you intend to take to meet senior status.  **Course Date Location ­­­­­­­­­­ Instructor** |

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| This certifies that the above-named candidate has demonstrated all the basic ski patroller and has sufficient knowledge, skills, and experience to participate in the national Senior Program.  Date      Patrol Representative (Signature) |