

**WINTERGREEN SKI PATROL
CANDIDATE APPLICATION FORM**

Date:

Candidate Personal Information

Name: (last) (first) (middle)

Name you prefer to be called/Nickname:

Birthday: / / Age:

Home Address:

Wintergreen Address:

Employer:

Employer Address:

Home Phone #: / /

Work Phone #: / / Extension: May we call you at work? Yes No

Wintergreen Phone #: / /

Cell Phone #: / /

Email Address:

My intent is for a: Paid Patroller Position (weekdays) Volunteer Patroller Position (weekends)

I desire the: Full Outdoor Emergency Care Course
 Condensed Course (must be doctor, nurse, or EMS personnel)

Ski Information

Candidate's Name:

I am a: New candidate for Patroller (do not desire to ski)

New candidate for Basic Patroller

Former patroller desiring to regain Basic Patroller status

Years patrolled:

Patrol:

Transfer patroller Years patrolled:

Patrol:

I rate my skiing as follows:

Alpine (Downhill) Skiing:

Beginner Advanced Beginner Intermediate Advanced Expert Instructor

Nordic (Cross-Country) Skiing:

Beginner Advanced Beginner Intermediate Advanced Expert Instructor

Snowboarding:

Beginner Advanced Beginner Intermediate Advanced Expert Instructor

Medical Certification

Candidate's Name:

CPR – Level C: Need Current Date Expires: / /

CPR Instructor: Current Date Expires: / /

EMT Basic State: Date Expires: / /

Shock Trauma State: Date Expires: / /

Cardiac Tech State: Date Expires: / /

Paramedic State: Date Expires: / /

Instructor: Date Expires: / /

Please list all medical degrees or certificates held, state & expiration date:

Medical Doctor State: Date Expires: / /

Dentist: State: Date Expires: / /

Registered Nurse State: Date Expires: / /

LPN State: Date Expires: / /

Physicians Asst. State: Date Expires: / /

Other: State: Date Expires: / /

Please list all EMS agencies of which you are currently a member:

Family Information

Candidate's Name:

Name of spouse:

Name spouse prefers to be called/Nickname:

Children:

1.Name:

Male Female Birthday: / /

2.Name:

Male Female Birthday: / /

3. Name:

Male Female Birthday: / /

4.Name:

Male Female Birthday: / /

5. Name:

Male Female Birthday: / /

In The Event Of an Emergency to Me

Spouse: / /

Parent: / /

Other: / /

My doctor is:

Address:

Telephone: / /

Medical Insurance:

Policy #:

Please list all medical problems or allergies:

Student Ski Patroller Application

Candidate's Name:

The candidate on this application is under the age of eighteen and is my son, daughter or I am his or her guardian. I am the appropriate person to give the required authorization for this candidate. The undersigned parent, parents or guardian(s) give(s) permission for this under-age candidate to participate in this training program. The undersigned agrees to supervise the minor during the training program, will guarantee that the minor is properly chaperoned on all overnight visits to the resort during the training period and agrees to abide by the requirements and rules of the National Ski Patrol Candidate Program and the Wintergreen Ski Patrol Code of Conduct and rules and regulation of the patrol and the resort. We agree to meet with the trainers and officers of the patrol to educate ourselves on the dangers of the program and agree to require our minor son, daughter or guardian to abide by the rules and regulations indicated. If the minor candidate purchases a space in the ski patrol house, we will ensure that this minor will not be permitted to be in the residence at any time without appropriate, adult supervision under the rules of the house and the patrol.

Mother: _____

Father: _____

Legal Guardian: _____

Date signed: / /

Special Talents & Expertise

Candidate's Name:

I consider the following as areas of special talent or expertise:

- 1.
- 2.
- 3.
- 4.

Foreign Languages:

Language:	<input type="checkbox"/> Read	<input type="checkbox"/> Write	<input type="checkbox"/> Speak
Language:	<input type="checkbox"/> Read	<input type="checkbox"/> Write	<input type="checkbox"/> Speak
Language:	<input type="checkbox"/> Read	<input type="checkbox"/> Write	<input type="checkbox"/> Speak

Information & References

I hereby certify that I have never been convicted of a felony or a crime involving theft, perjury, battery, child abuse, or any other offense involving sexual matters.

I have a criminal record but would request the opportunity to present information to the appropriate officer to explain the circumstances.

I authorize the Patrol Leader of this patrol or the Candidate Screening Officer or their designated representative to check my references and confirm this information with any law enforcement agency. This document is to be considered a waiver of the privacy act and authorizes the release of criminal history record information. All such information will remain confidential and will be used only by the Wintergreen Ski Patrol and National Ski Patrol to process this application.

I give the following character references:

Name: _____ Phone: / /

Address:

Relation:

Name: _____ Phone: / /

Address:

Relation:

Candidate's Signature: _____