

NOLS Instructor Course Application

APPLICATION UPDATE FORM

Name: _____ Date we last reviewed your application? _____ App ID#: _____

Course Registration Update: I am applying for the: (Select all that interest you) <input type="checkbox"/> MOUNTAIN Instructor Course <input type="checkbox"/> RIVER Instructor Course <input type="checkbox"/> SEA KAYAK Instructor Course <input type="checkbox"/> SAIL Instructor Course <input type="checkbox"/> Yukon River Instructor Course	DATES : 1st choice _____ 2nd choice _____ 3rd choice _____ _____ _____	For Office Use Only: Course: _ Code: _ APID#: _
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Personal Information Update:

Address _____ Occupation _____
 _____ Employer _____
 Phone Number (Day) _____ (Evening) _____ Email _____
 Address good from: ____ / ____ / ____ to ____ / ____ / ____

Medical Training Certification Update: do you have a current certification that meets our requirements? (see pg. 2)

Yes Certification: _____ Provider: _____ Exp. date: _____ *Attach a photocopy, we won't review without it.*
 No When will you be certified? _____ Certification: _____ Provider: _____ *You must send a letter verifying enrollment.*

Scholarship Update? I wish to resubmit the IC Scholarship Application Form, please send me one.

When are Updated Applications Due?

We review applications **only once a year** with the exception of the Sailing IC. **Deadlines are firm and applications, including all forms and certifications, not complete by the stated deadline, will not be reviewed until the next year.**

	<u>Deadline</u>	<u>Notification Date</u>
Main review for all IC's	January 5	February 15
Sailing IC review	Rolling Review	within 3 weeks of your application's arrival

Application Fee?, Mailing Address, Fax Number: For IC Applications, the original \$65 application fee gives you two reviews. If this is your third review, you must submit another \$65 app fee at this time, or your update will not be processed.

check here if this is your second review and your original application fee still covers you for a review of this update.
 check here if this is your third review and you need to submit another \$65 application fee. Indicate payment method below.



check here if paying application fee by check or money order payable to NOLS. Attach check to this section of the application form. Mail update form and check to NOLS:

Admissions office
National Outdoor Leadership School
284 Lincoln Street
Lander, WY 82520-3128
800-710-6657
admissions@nols.edu

check here if paying application fee by credit card.

VISA Master Card

Name: _____

Account number: _____

Expiration Date: _____

Signature: _____

NOLS also accepts updates by **fax (307) 332-1220**. If faxing, the application fee **must be paid** by credit card.

Questionnaire and Resume Update: Update us on your skills and experiences **since your prior application** was reviewed. Please do not restate info from original application. Use separate paper, and submit it with this form. Before sending us your update, please take the time to review your update for clarity and a balance between being concise and providing the detail we request. Please provide detailed answers to each question. Some of your answers to these questions will undoubtedly overlap with each other, feel free to cross reference your answers, e.g.: "... I gained additional leadership experience on the trip in Olympic NP in '96 (mentioned in #4)..." - or - "...my third season at Canyon Adventures (see #3 and resume), I was a member of the staff training team..."

1. Do you want to work for NOLS? How much each year will you be available? Will you be available to work for NOLS after your IC? For the RIC, KIC and Mtn IC's, what specific dates will you be available in the summer of 2002?
2. **Additional experience as student/trainee in outdoor education:** Mention the name of the company/program, # of days/weeks involved, etc. Include a brochure if it will help us understand your experience.
3. **Additional experience working in outdoor education:** List all jobs you've held in the field. Mention the name of the company/ program, # of days/weeks worked, responsibilities you held, etc. Include a brochure if it will help us understand your work.
4. **Personal Expeditioning:** (by "personal" we mean trips with friends, not trips associated with an institution) please list all backpacking, winter camping, ocean travel, river travel, etc. Include length, locations, whether on/off trail, your role in leadership, etc.
5. **Technical Skills/Experience:**
 - **Climbing/mountaineering:** List routes you've led or followed, peaks you've climbed, etc. Describe your role (follower, leader, guide) in these climbs. What difficulty level (e.g. 5.6, 5.9, WI4, etc) do you comfortably lead trad rock routes, etc.
 - **Whitewater River:** Canoeing, kayaking, oar and paddle rafting. Include what class water you comfortably paddle/guide/row in each different water craft, the names of rivers/runs you've floated, number of trips per river/run you've taken, the difficulty of these runs, the distance in miles/number of days per trip, and your role in these trips. If you could put most of this information into a river log format, it would be very helpful.
 - **Other skill areas taught at NOLS - sea kayaking, sailing, backcountry skiing, horse packing, caving.** As applicable to these skill areas, include details such as: your skill level in the various activities, the # of trips, the length and location of trips, and your role, etc.
6. **Other Skills/Experience:** List any experience with natural sciences, natural history, human history, hunting, fishing, snorkeling, public policy/wildland management, environmental activism, non-English languages, foreign travel, etc.
7. **Teaching, Leadership and Communication:** list experience teaching and leading groups, teaching one-on-one, working with the public, any training you've had with group dynamics or communication.
8. **Safety and Judgment:** please tell us a new story - give an example of your experience with hazard evaluation, individual and group assessment and management.

Medical Training Requirements and Information

- **You must possess current CPR and Wilderness Medicine certification** meeting our minimum standard (see below).
- Both **certifications must expire after August 31** of the year in which you take the IC. If your certifications will expire before then, a letter confirming enrollment and/or attendance in a recertification course is required with your application.
- **If you are not certified** in first aid at our minimum standard, a letter confirming enrollment in such a course, to be completed (and certification received) prior to May 31 of the year in which you take the IC, is required with your application.
- **Our minimum standard:** a **wilderness** medicine certification for at least **72** hours of instruction.
- We **prefer** Wilderness First Responder (WFR) certification or Wilderness Emergency Medical Technician (W-EMT) certification from our Wilderness Medicine Institute.
- **The Wilderness Medicine Institute of NOLS (WMI)** offers courses throughout the Rockies and Western U.S., and in several other countries. If you are in need of a wilderness medicine course, please check our schedule at <www.wmi.nols.edu> or call WMI at 970-641-3572.
- Urban emergency response or first responder certification are not sufficient for working as a NOLS instructor, as they do not train you to implement the NOLS Field Treatment Protocol. WMI does provide a Wilderness Upgrade for the Medical Professional course (54 hours) which converts an EMT certification to W-EMT and a First Responder to WFR.
- Contact the NOLS admission office if you have questions. 800-710-6657.

For Office Use Only:

Student Name: _____

Course: _____

Code: _____

APID#: _____

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Letter of Recommendation Form

The National Outdoor Leadership School (NOLS) is a nonprofit private school whose mission is to be the best source and teacher of wilderness skills and leadership that protect the user and the environment. Each year we select candidates from a large group of applicants to attend these courses. We are looking for individuals who have excellent wilderness skills, communication, teaching and leadership experience.

(Feel free to write or type on this form, extend your comments onto the back of this form, or send a separate document.)

Confidentiality: The information provided will not be made available to the instructor course applicant unless specifically authorized to do so in writing by the person providing the information.

Name of Applicant

Date

1. What is your relationship to this person?
2. On a scale of 1 to 10 how would you rank the candidate's overall performance?
3. What are the candidate's greatest strengths? Areas for improvement?
4. How would you describe the candidate's work relationships with other managers, peers or supervisees?
5. Please comment on the candidate's attendance, dependability and work ethic?
6. How does the candidate respond to stressful situations?

If you have employed the candidate in the field of outdoor recreation please answer the following questions.

1. Please comment on this person's outdoor skills, safety awareness, teaching and leadership? What populations has this person worked with?
2. Is the candidate eligible for rehire? YES NO

If there are any other qualities about this person or areas for growth that you feel we should know, please use the space below for further comment.

Your Name

Signature

Address

Phone Number (Day) (Evening)

Occupation

Employer

Please send your letter of recommendation under separate cover to:

Instructor Course
National Outdoor Leadership School
284 Lincoln St.
Lander, WY 82520

Phone: 800-710 6657
Fax: 307-332-1220
E-mail: admissions@nols.edu