

**NSP Education Program  
ACTIVITY RECORD  
SENIOR CORE AND ELECTIVE COMPONENTS**

This form is to be maintained by the applicant and submitted to the Patrol Representative upon completion

Senior Candidate Name	Email Address
NSP ID #	Classification
Patrol:	Phone Number
Region	Division
Senior Program Application Date	Applicant Signature

Senior Alpine     
  Senior Nordic     
  Senior Patroller

**VERIFICATION OF COMPLETION**

Required for A = Alpine N = Nordic X = Patroller	Senior Component	Instructor	Completion Date
A, N, X	Senior Outdoor Emergency Care		
A	Senior Alpine Skiing		
A	Senior Alpine Toboggan		
N	Senior Nordic Skiing		
N	Senior Nordic Extended Ski Tour		
N	Senior Nordic Toboggan Transport/Belay		
N	MTR Level II Course		
N	Aid Room Management Module		
A, N, X	Elective 1		
A, N, X	Elective 2		
A, X	Elective 3		
X	Elective 4 (leadership course from list)		

**FINAL CERTIFICATION**

I certify that the above candidate has completed all senior program requirements.

Date: \_\_\_\_\_ Patrol Representative (Signature)

Date: \_\_\_\_\_ Region Senior Coordinator Representative (Signature)

Patrol Representative or Region Senior Coordinator - on completion, please submit to:  
**National Ski Patrol 133 S. Van Gordon St. Lakewood, CO 80228**