



SKI ASTONS

Ski Tutor /Guide
Application

Mr/ Mrs/ Miss/ Ms Forename: _____ Surname: _____
Date of Birth: _____ Age: _____
Nationality _____
Current Occupation _____

Please attach a recent passport sized photograph

Address _____

Postcode _____

If you are a student, please give a permanent address at which you can be contacted:

Postcode _____

Telephone Number (include STD Code) _____ Mobile: _____
Day: _____ E Mail: _____
Evening: _____ Fax: _____

QUALIFICATIONS / CERTIFICATES

Please also enclose photocopies of any qualifications/certificates stated below:

	Date & Place Obtained	Current Licence / Ref no.
<input type="checkbox"/> BASI Grade	<input type="checkbox"/>	_____
<input type="checkbox"/> SNSC ASL		_____
<input type="checkbox"/> SNSC APC		_____
<input type="checkbox"/> ASSI		_____
<input type="checkbox"/> BASI Trained		_____
<input type="checkbox"/> Other (State)		_____
<input type="checkbox"/> FIRST AID		Expires _____

Please indicate with a tick whether you possess any of the following licenses:
 Car (Date passed) _____ PCV (Date passed) _____
Do you have any experience driving on the continent? _____

Please state any specific medical or dietary requirements: _____

Have you ever been convicted of a criminal offence not covered by the rehabilitation of offenders act?

SKIING HISTORY

Experience skiing on snow: _____ weeks _____ seasons

Instructing experience on snow _____ weeks _____ seasons

Instructing experience on dry _____ weeks _____ seasons

Please state experience of instructing schools / youth groups (List time period and company)

State other coaching / teaching / instructing experience with youth groups:

Please indicate your knowledge of the listed resorts using the following grading:
A- Excellent B-Good C- Basic (Leave blank where no knowledge assumed)

AUSTRIA

<input type="checkbox"/> WILDERKAISER	<input type="checkbox"/> ZILLER VALLEY	<input type="checkbox"/> OTHER
<input type="checkbox"/> Ellmau	<input type="checkbox"/> Mayrhofen	<input type="checkbox"/> Saalbach
<input type="checkbox"/> Scheffau	<input type="checkbox"/> Zell am Ziller	<input type="checkbox"/> Zell am See
<input type="checkbox"/> Soll	<input type="checkbox"/> Kaltenbach	<input type="checkbox"/> Kaprun Glacier
<input type="checkbox"/> Westerndorf	<input type="checkbox"/> Hochfugen	<input type="checkbox"/> Stubai Glacier
	<input type="checkbox"/> Hintertux Glacier	<input type="checkbox"/> Kitzbuhel

SWITZERLAND

<input type="checkbox"/> JUNGRAU	<input type="checkbox"/> Saas Grund	List other regions skied _____ _____ _____ _____
<input type="checkbox"/> First	<input type="checkbox"/> Saas Fee	
<input type="checkbox"/> Wengen	<input type="checkbox"/> Gstaad	
<input type="checkbox"/> Kleinscheidegg	<input type="checkbox"/> Verbier	
<input type="checkbox"/> Murren		
<input type="checkbox"/> Schilthorn		

FOREIGN LANGUAGES

Please specify any foreign languages spoken indicating whether fluent or working knowledge:
