

**PSIA**



**AASI**

**ROCKY MOUNTAIN DIVISION**

Professional Ski Instructors of America  
American Association of Snowboard Instructors

## **Adaptive Alpine and Snowboard Instructor Mentoring Opportunity Attendee Information Form**

Please send completed forms to [tim@psia-rm.org](mailto:tim@psia-rm.org)

**Name:**

**Contact info (phone and email):**

**Preferred gender pronoun (she/her/hers; he/him/his; they/them/theirs) - select which apply**

**Adaptive education and experience:**

**PSIA/AASI or other sports instruction/coaching or professional certification(s):**

**Current snowsports school(s):**

**Types of lessons you teach (select all that apply):**

- Alpine
- Snowboard
- Telemark
- Nordic
- Adaptive Alpine
- Adaptive Snowboard
- Adaptive Telemark
- Adaptive Nordic
- Children
- Adults
- Private
- Groups

**Individual learning outcomes for specific session (specific and measurable):**

**What have you been working on so far to accomplish these outcomes?**

**Personal leaning preferences:**

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**Special needs or accommodations:**

**Other valuable information to share with the mentor for today's session:**

<b>Administrative Use Only:</b>
<b>Mentor/Staff member input:</b>
<b>Learning Outcomes:</b>
<b>Learning Activities:</b>
<b>Time frame (number of sessions, time of each session):</b>
<b>Credits applied:</b>
<b>Mentee agree to this plan: Y/N</b>
<b>Office completion of course set up and credit applied: Y/N</b>