

Daryle Bogenrief Memorial Scholarship Fund

Daryle Bogenrief began his membership with PSIA/AASI in January 2001. He passed his level 1 Alpine certification on April 20, 2001, his level 2 Alpine certification on April 1, 2002, his level 3 Alpine certification on April 3, 2003, his Alpine Trainer Accreditation on April 17, 2004 and attained Alpine Examiner 1 status on April 7, 2005. He was one of the youngest people to be selected Examiner 1 in recent years.

In his youth, Daryle lived in a number of countries abroad including Scotland, Germany and Turkey. His family settled in Monument where he graduated from Lewis-Palmer High School in 1998. He attended Fort Lewis College and worked as a river guide for Mild to Wild Rafting. He was a ski instructor at Durango Mountain Resorts and Vail Resorts.

Daryle passed away in the summer of 2005 in a rafting accident. Daryle was one of the youngest Education Staff members for PSIA-RM and he also had great interest in helping returning soldiers to ski. This scholarship is intended for new instructors, preferably with an interest in Adaptive, but will not be limited by discipline.

Application Requirements

1. Must be currently teaching for a PSIA/AASI-RM member school.
2. Applications must be completed in full and emailed to info@psia-rm.org (please do not mail).
3. Funds must be used to further education and/or certification in professional ski or snowboard teaching.

****Scholarships that are awarded will not be paid directly to the individual.****

Daryle Bogenrief Memorial Scholarship Fund Application

Personal Information:

Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____

Professional Information: (membership not required to be considered for scholarship)

PSIA/AASI-RM Member #: _____ Member Since: _____

Certification Level(s): _____

Membership in other ski related organizations: _____

Snowsports Teaching Background:

Started Teaching: _____ Current Member School: _____

Why did you become a snowsports instructor?:

References:

Attach any letters of recommendation from member school directors, supervisors or others relevant to your qualifications for your request.

I certify that all of the information provided in this application is true and accurate. I understand that my Director and other references may be contacted in regards to the information provided.

Signature: _____ Date: _____

Please EMAIL completed applications to info@psia-rm.org.