



ROCKY MOUNTAIN

Adaptive Alpine/Snowboard Instructor Mentoring Opportunity Information Form

Please save and email completed form to Steve Rosenthal at steve@psia-rm.org.

Name:

Contact info (phone and email):

Preferred gender pronoun – (she/her/hers; he/him/his; they/them/theirs)

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):



ROCKY MOUNTAIN

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

Personal leaning preferences:

Special needs or accommodations:

Other valuable information to share with the mentor for the session(s):

Administrative Use Only:
Mentor/Staff member input:
Learning Outcomes:
Learning Activities:
Duration (number of sessions, time of each session):
Credits applied:
Mentee agree to this plan: Yes No
Office completion of course set up and credit applied: Yes No