



**New York State
Parks, Recreation and
Historic Preservation**

Snowmobile Unit

t: (518) 474-0446

f: (518) 486-7378

snowmobile.unit@parks.ny.gov

KATHY HOCHUL
Governor

RANDY SIMONS
Commissioner *Pro Tempore*

Snowmobile Safety Education Instructor Application Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ County: _____

Daytime Phone: _____

Evening Phone: _____

Cell: _____

Email: _____

If law enforcement officer, please provide name and address of employer:

Employer: _____

Address: _____

City: _____ State: _____ Zip: _____

If you have taken the NYS Snowmobile Safety Course, please provide certificate number: _____

Teaching/Volunteer Experience: _____

(Copies of teaching certificates are required)

Affiliations:

Have you ever been a NYS Snowmobile Safety Course Instructor? Yes () No ()

➤ If so, what was your instructor number? _____

Are you a member of the New York State Snowmobile Association? Yes () No ()

Are you a member of a New York State snowmobile club? Yes () No ()

➤ If yes, please provide club's name: _____

New York State Office of Parks, Recreation and Historic Preservation

625 Broadway Albany, New York 12238 • (518) 474-0456 • parks.ny.gov

Except for minor traffic violations, have you ever been convicted of a violation of the law?

Yes () No ()

If yes, please list **ALL** violation(s) or crime(s) of which you were convicted and date(s) of the convictions below:

Are you currently on parole or probation? Yes () No ()

If yes, please explain: _____

Are you currently awaiting trial on any criminal charge? Yes () No ()

If yes, please explain: _____

Are you currently on deferred adjudication? Yes () No ()

If yes, please explain: _____

By signing below, I am requesting that the Office of Parks, Recreation and Historic Preservation review my instructor application. I recognize that the requirements set forth in (NYCRR Part 456.3 must be met prior to my instructor certification being issued. I affirm under penalty of perjury that all statements made on this application are true. I understand that all statements made by me in connection with this application are subject to investigation and verification which may include checking any and all public records to verify the accuracy of information provided. An omission, material misstatement or fraudulent representation may disqualify me from instructor certification and/or lead to revocation of my instructor certification.

Applicant's Signature: _____ Date: _____

() Enclosed is a copy of my NYS Snowmobile Safety Certificate from a classroom course.

() Enclosed is a copy of my Driver's License or other government issued ID with photo

() Enclosed is documentation on my teaching credentials OR

() I plan to assist a certified instructor with 2 courses after completing the Snowmobile Safety Instructor application and VSA form

New York State Snowmobile Safety Education Instructor Qualifications

Requirements to become a NYS Certified Snowmobile Safety Course Volunteer Instructor

- 1. Must be a minimum of 18 years old**
- 2. Successfully complete the New York State Snowmobile Safety Education Course**
 - Course must be taken prior to assisting with a Safety Course
- 3. Fill out a Snowmobile Safety Education Instructor Application Form**
 - Application must be filled out and on file with the Office of Parks, Recreation and Historic Preservation (OPRHP) prior to assisting with a Safety Course
- 4. Demonstrate an ability to instruct**
 - Assist with 2 Snowmobile Safety Education courses given by a NYS Certified Safety Instructor and receive a satisfactory recommendation from the instructor. **Confirm that the instructor has listed you on the back of their Course Attendance sheet (ADM 115)**
 - OR
 - Present a State teacher's certificate or equivalent teaching training or experience AND assist with 1 Snowmobile Safety Education course and receive a satisfactory recommendation from the instructor. **Confirm that the instructor has listed you on the back of their Course Attendance sheet (ADM 115)**

*****Please note that ALL paperwork MUST be on file with OPRHP prior to assisting with any classroom training*****



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Volunteer Service Agreement

Please Print

Name:		Instructor No.:
Street:		
City/State/Zip:		
Telephone (home): (work):		Email:
Social Security #: XXX-XX- (only enter the last four digits)		Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No
OPRHP Description of Volunteer Service: To provide snowmobiling education to the snowmobiling and non-snowmobiling public of New York State.		

In Case of Emergency Notify:

Name:	Address:
Telephone:	City/State/Zip:

I certify, to the best of my knowledge, that the statements I have made are true and correct. I understand that the volunteer services described above are to be performed at no cost to the state. I will be required to comply with all regulations of the Office of Parks, Recreation & Historic Preservation ("OPRHP") and the regulations and procedures of the Snowmobile Unit.

The Snowmobile Unit of the Office of Parks, Recreation & Historic Preservation agrees, during the period of service, to provide for the volunteer Worker's Compensation coverage to the extent provided by law. If I am injured, I agree to promptly notify OPRHP and OPRHP shall process my claim under the Worker's Compensation Law. As a volunteer, I am also entitled to defense and indemnification pursuant to the Public Officers Law § 17. I agree to immediately notify OPRHP's Counsel's Office at (518) 486-2921 should I require such defense and indemnification. The personal information on this form will be treated as private pursuant to the Personal Privacy Protection Act.

^ (Date)

^ Signature of Volunteer

for OPRHP personnel only ^ (Date)

^ Signature of Snowmobile Education Representative or Designee

This form expires annually on August 31 or prior to this date if the volunteer notifies the Snowmobile Unit in writing that they no longer wishes to be a NYS Parks Snowmobile Safety Course Instructor or if an instructor is terminated for cause.

Return to:
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