

UNITED STATES POLICE CANINE ASSOCIATION, INC.

Application for Trainer

Date: _____

FORM MUST BE TYPED

Region: _____

Level Applying For:

Regional Trainer

Detector Trainer

Level I

Level II

Level III

Name: _____ DOB _____

Home or Work Address: _____
Street City State Zip

Home Phone: _____ Cell Phone: _____ Email: _____

Membership status: Regular

Associate

Agency Employed by: _____ Immediate Supervisor: _____

Present Position: _____ Years in this position? _____

Years assigned as Dept Trainer? _____ Date assigned as Trainer? _____

Total number of dogs trained? _____

Dogs trained by you who have certified PDI/Tracking/Detector that are verifiable by National Records: Please list exact region, date and type of certification. Include copy of the certificate of certification for each. Use an additional typed sheet if needed.

Handler and dog's name	Region	Date	Type of Certification
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Are you a Nationally Certified Judge? _____ List discipline (s) _____ Judges #: _____

Are you a Regionally Certified Judge? _____ List discipline (s) _____

*****Applicant must submit copies of the certificates for teams they are submitting. Applicant must also submit a copy of your course curriculum and letterhead affirming assignment as your agencies trainer.**

List seminars and schools attended: (use additional typed sheets if needed)

Applicants Signature: _____ Date: _____

Required signatures:

Regional President's Signature: _____ Date: _____

Other Regional Officer Signature: _____ Date: _____

** Please attach any other information you feel qualifies you as a USPCA Certified Trainer. Examples: Letter of recommendation, resume, etc. If more than one trainer claims the same team, then a letter on department letterhead must be submitted from the K-9 Supervisor of the agency hosting the Training class. (see qualifications for further details)*

NATIONAL OFFICE USE ONLY

Date Received at the Office of the Trainers Committee Chairman: _____

Sent to Committee: _____

Date Received at the National Secretary's Office: _____

COMMITTEE RECOMMENDATION: _____

Signature of the Trainers Committee Chairman: _____

Date of Approval by the National Executive Board: _____

If denied, reason for denial: _____

Date applicant notified that the application has been denied: _____

(Applicant must be notified within 30 days of receipt of the application)