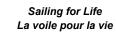
Sailing to Win La voile pour la victoire



Cruising, Power, and Navigation Instructor - Certification Application

Level Sought:							
Level Last Certified:				Date Last Certified://			
First Clinic: □ Crossover: □	Re-c Tear	f certification soug ertification Clinic: □ n Teaching: □] Spec				
					Instructo	or Number	:
City: Phone (H): () _	(W)	()	(Cell): (Pro _)	vince: I Birth	Postal Cod	e:
Phone (H): () Address of Emerge City:	ency Contact:	on () miting Medical Cor	(Cell): (_)			
First Aid issued by: CPR issued by: VHF issued by:		n copies of certifica	_on: _ on: _ on:	 	Expires: _ Expires: _ Expires: _	/ /	/ /
Afloat Power Level	el: l:	Issued	at:		Date	::/	/ /
Highest Sail Canad	1						
Level: Clinic Location:	Cruising	Power		Navigatio	n	IE	
Date: Conductor(s): Special Endorsements							



Sail Canada Instructor Experience Hours (Attach additional pages as needed):

Period	Level	Level Classroom Afloa		Live-Aboard		

Additional Qualifications e.g. Sail Canada, RYA, ASA, US Sailing, CPS... (attach copies of certificates, logs etc.)

Organization:	Level:	Year:	
Organization:	Level:	Year:	

Boating Experience - Identify vessel type, number of years & location(s), identify day/night

As Crew	
As Navigator	
As Skipper	
As Owner	

Other Related Experience - Training / skills / technical experience (marine engines, training courses, scuba, first aid....)

IE Recommendation of Candidate (all except Basic Instructor levels)

I hereby provide an unqualified recommendation to the Provincial & National Committees for this candidate to become an Instructor at the identified level. I have observed the candidate teaching students. The candidate has the knowledge & ability to coach & evaluate students. The candidate has demonstrated the skills and ability to teach at the certification level sought. I believe he/she will uphold Sail Canada Code of Ethics and the LTC&P Policy.

Signature:	Date://
IE Name:	Card #:



Cruising, Power, and Navigation	3	
Instructor - Certification Application Cruising 2022-02-12		

For Application Reviewer Use : Recommendation of Candidate (Special endorsements only)

I have personally reviewed the attached teaching materials, curriculum & lesson plans and confirm that these plans appropriately cover the material in the indicated standard. I certify that candidate has written the exam for the level of certification desired to 90% in the allocated time. Exam _____ Date Written: ____/ Mark Achieved: _____ Exam ______ Date Written: ____ / ____ Mark Achieved: _____

Signature:	_Date://
IE Name:	Card #:

Additional information required (attach separate sheets as required):

For all Navigation Instructor standards: identify practical day and night experience at the requested level and outline any additional qualifications to support the IE recommendation above.

For Advanced Navigation Instructor: identify Practical Radar Training (attach Evidence).

For Racing Instructor: Describe racing experience.

For Intermediate and Advanced instructor standards, identify flying sail experience.

For all special endorsements clarify the need for an instructor at the desired level in your area.

Instructor (excluding new candidates) and I.E. Candidates should complete the candidate activity report.

Number of separate sheets attached: _____

Candidate Agreement and Disclaimer

I will participate at my sole risk and responsibility and agree to abide by Sail Canada Policy and observe any safety and seamanship concerns of the Instructor Evaluator. I voluntarily waive any rights of action against Sail Canada and Instructors for any injuries, damages or losses that my property or I might sustain. I hereby certify that all of the foregoing information provided is true and correct. Further I agree to uphold the Sail Canada and the all Canada Learn to Cruise and Power Policies and Code of Ethics.

Note: Effective January 1, 2022 a fee of \$150 must accompany applications for special endorsement submitted to

Sail Canada.

Signature: _____ Date: ____/____