

Full Name:

## Diploma in Outdoor Instruction and Guiding Student Application Questionnaire

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*Please answer the following questions to the best of your ability. There are no right answers for these questions. The purpose is to give us an insight into your level of prior learning as it relates to this programme.*

1. Why do you wish to be considered for this programme?

2. What training and experience do you have in the following areas? Please give details.

Risk management specific to the outdoor environment:

Interpersonal communication, leadership, teamwork:

Academic writing (essays, research, presentations):

3. What experience have you had teaching or leading people in outdoor activities?

4. Describe your ability as a swimmer (in cold fresh water) – tick one only:

Strong

Average

Poor

Can't Swim

5. Time yourself. How long does it take you to complete a 5 km run?

6. Do you hold a current (completed within eighteen months of programme start) First Aid Certificate, which includes NZQA units 6400, 6401, 6402 or equivalent?

Yes

No

If not, when are you planning to gain it?

7. Employment Record

Please state any part time and/or full time, including holiday employment, work-based training and voluntary work. (use the table on next page)

Employer's Name	Employer's Phone	Type of Work	Dates From - To	Full or Part Time

9. Offences

Have you been convicted of a criminal offence within the past ten years, or are you currently being charged with a criminal offence? If Yes, please explain.

10. Referees

Please provide the names of two referees who may be contacted by us.

Name:

Relationship to referee:

Telephone:

Day

Night

Name:

Relationship to referee:

Telephone:

Day

Night

**Applicants must hold a current (completed within 18 months prior to programme start) First Aid Certificate, which includes NZQA units 6400, 6401, 6402 or equivalent.**

**Please upload a copy of your current first aid certificate when submitting your application for enrolment. If you don't yet have it, please ensure that we receive a copy prior to the start of the programme.**

# Elective Choices

Please choose the electives you would like to specialise in. You may specialise in three or four pursuits.

Rate your electives in order of preference (we will endeavour to allocate your first choices, however this is not always be possible). Confirmation of your choices will be given well in advance of your start date.

The following electives are available. You must choose at least one practical elective:

- Raft
- Rock
- White water Kayak
- Mountain (preference will be given to those also doing rock)
- Sea Kayak
- Industry and Workplace Studies (includes a pre-course 8 week work placement in the summer break).
- Sustainability

**NB To gain direct entry into the ARA Degree programme, students must do white water kayak and rock.**

**How many electives do you wish to do?** \_\_\_\_\_

Detail your practical pursuit experience below:

<b>Elective</b>	<b>Write a summary of your experience, eg. where you received training, where you participated in these outdoor pursuits, what skills you have acquired, etc</b>
<b>Choice 1</b>  Pursuit: _  Year started: _  Total number of days involved in pursuit:  _____	
<b>Choice 2</b>  Pursuit: _  Year started: _  Total number of days involved in pursuit:  _____	
<b>Choice 3</b>  Pursuit: _  Year started: _  Total number of days involved in pursuit:  _____	

<b>Elective</b>	<b>Write a summary of your experience, eg. where you received training, where you participated in these outdoor pursuits, what skills you have acquired, etc</b>
<b>Choice 4</b>  Pursuit: _____  Year started: _____  Total number of days involved in pursuit:  _____	
<b>Choice 5</b>  Pursuit: _____  Year started: _____  Total number of days involved in pursuit:  _____	

Other supporting comments

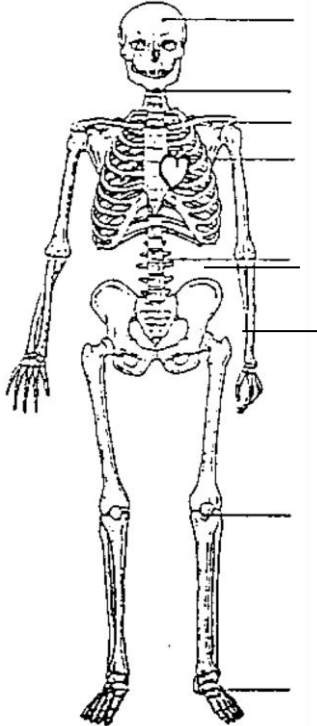
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**CONFIDENTIAL MEDICAL INFORMATION**

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**Please read this carefully:** Medical conditions do not necessarily prevent you from participation in our programme. In the interest of safety could you please indicate with a tick (✓) if you have ever suffered from, or do suffer from any of the following.

**Injuries to:**



- |                                       |  |
|---------------------------------------|--|
| <input type="checkbox"/> Head         | <input type="checkbox"/> Asthma  |
| <input type="checkbox"/> Neck         | <input type="checkbox"/> Diabetes  |
| <input type="checkbox"/> Shoulder/Arm | <input type="checkbox"/> Claustrophobia                                    |
| <input type="checkbox"/> Heart        | <input type="checkbox"/> Haemophilia                                       |
| <input type="checkbox"/> Spine/Back   | <input type="checkbox"/> Allergies (bee stings, etc)                       |
| <input type="checkbox"/> Pelvis/Hip   | <input type="checkbox"/> Epilepsy  |
| <input type="checkbox"/> Wrist        | <input type="checkbox"/> Episodes of depression, anxiety or breakdowns.    |
| <input type="checkbox"/> Knee         | <input type="checkbox"/> Other (e.g. serious illness, operation or injury) |
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**I have trouble:**

- Seeing
- Hearing
- Speaking English
- Swimming/Floating

I consider my health to be:

- Excellent       Good       Restricted       Fair

Reasons why:

My current weight is:  kg      My current height is:  cm

Are you on any medication? (If so, please state.)

Are you allergic to anything? (If so, please state)

In case of emergency who should be contacted?

Name:

Relationship:

Telephone: Day  Night

Mobile

From time to time the programme will be remote from immediate hospital or medical care. By signing this form you are giving consent to receive medical treatment from the tutor(s) and/or medical personnel in an emergency situation. You are also allowing your medical information to be supplied to all tutors employed to teach you on the programme. This information will otherwise be treated as confidential.

***FITNESS DECLARATION***

It is the responsibility of the student to maintain his/her personal fitness at the level required to participate in all practical components of the programme. This is a Health and Safety requirement, not only for the individual concerned, but also for staff and other students in the group.

Failure to maintain fitness at the required level will result in the Polytechnic withdrawing the student from those practical components of the programme wherein the student's lack of fitness poses a safety risk. Such withdrawal will not entitle the student to any fee refund.

I agree to the above conditions of entry to outdoor recreation programmes.

***ACKNOWLEDGEMENT OF RISK***

By signing this form, I acknowledge that there are inherent risks involved in the outdoor activities I will be participating / training in whilst studying outdoor pursuits programmes at Tai Poutini Polytechnic. I understand that Tai Poutini Polytechnic will take all practicable steps possible to ensure my safety, however my safety cannot be absolutely guaranteed.

***DECLARATION***

I certify that the details given on this form are correct and that, if accepted for this programme, I will observe such rules and conditions as may be required by Tai Poutini Polytechnic.