

National Search Dog Alliance (NSDA)

Apprentice K-9 Evaluator Application

To apply, please complete the application form, sign, date and send with the required documentation. Send two (2) copies of the entire packet to:

Kathy Roeder, NSDA Evaluator Administrator
8080 Wildwood Lane
Barnhart, MO 63012

Questions: e-mail Kathy at kroeder@brick.net

APPLICATION MUST BE PRINTED OR TYPED

INCOMPLETE OR PARTIAL APPLICATIONS WILL BE REJECTED

Applicant Information

Name:	Address:			
City:	State:	Zip:		
Home Phone:	Cell Phone:	Work Phone:		
E-Mail(s):	NSDA Member #:			
Discipline(s): Circle one or more:	Area	Avalanche	Back Tracking	Disaster
	Land HRD	Trailing	Water HRD	
Affiliation/Team:				
Address:				
City:	State:	Zip:		

REQUIRED DOCUMENTATION CHECK LIST:

Provide copies of certificates or other required documentation

1. Completed NSDA Evaluator Application	
2. Current NSDA Membership Card	
3. Current CPR Certification	
4. Current First Aid Certification	
5. NIMS IS 100/100.a/current version	
6. NIMS IS 200/200.a/current version	
7. NIMS IS 700/700.a/current version	
8. Proof of a minimum of five (5) years handling a search and rescue/recovery K-9 in the discipline(s) for which the applicant is applying	
9. Resumé outlining experience in K-9 search and rescue	
10. Deployment record of at least five (5) documented missions in <u>EACH</u> discipline for which applied (except disaster)	
11. Proof of certification as a K-9 Handler from an approved certifying organization or agency*. Must have a certificate, a letter or official documentation in each discipline for which applied.	

* NSDA approved certifying organizations are IPWDA, NAPWDA, NASAR, NNDDA, FEMA, USAR, or STATE certification. NSDA will consider standards from other organizations on an individual basis. The organization must be recognized by the NSDA as an outstanding leader in K-9 training, testing, documentation and professionalism. You must submit a copy of the standard and evaluator criteria for the organization to be considered.

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SAR Reference

Provide the name and address of a SAR/LE professional or other independent third party from whom NSDA will be able to obtain a written letter of recommendation for you. A reference from any member of your local SAR Team will not be accepted. :

Name: _____

Agency: _____

Address: _____

City: _____

State: _____

Zip: _____

Work Phone: _____

E-mail address: _____

Acknowledgement

By my signature below, I certify that, to the best of my knowledge, the information provided is true and correct. I understand that false or misleading information may lead to the rejection of my application or its revocation. In addition, I agree to

- 1. be listed as an Evaluator on the NSDA website including my contact information.**
- 2. abide by NSDA Policies and Procedures knowing that NSDA may retract my appointment to assist with evaluations if I am found negligent of following Alliance policies.**
- 3. submit to a critique of my evaluation process. (More information is available in the Evaluator Guidelines.)**
- 4. sign a contract with NSDA upon my acceptance as an Apprentice Evaluator.**

NAME (Please PRINT) _____

SIGNATURE: _____ DATE _____