

RPM Academy

**RIDER EDUCATION PROGRAM**

**RIDER COURSE INSTRUCTOR RENEWAL and ICC APPLICATION**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Renewal** |       |  | **Certification Update** |       |  | **Course I am applying to be certified in:** |       |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name  |       |  | Date |       |

Name

|  |  |  |  |
| --- | --- | --- | --- |
| Address |       | City |       |

|  |  |  |  |
| --- | --- | --- | --- |
| State / Province |       | ZIP / Postal Code |       |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone (Home) |       | Phone (Cell) |       |

|  |  |
| --- | --- |
| Email |       |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| RPMA Inst # |       | Exp Date |       | CSC # |       | Exp Date |       |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ESC # |       | Exp Date |       | MSF # |       | Exp Date |       |

Current Rider Course Certifications (If any)

Rider Course Instructor [ ]  Master Instructor [ ]  Date of Initial GWRRA Certification

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ARC |  | Date Certified |       | Certified By: |       |
| TRC |  | Date Certified |       | Certified By: |       |
| TC |  | Date Certified |       | Certified By: |       |
| TTRC |  | Date Certified |       | Certified By: |       |
| SRC |  | Date Certified |       | Certified By: |       |

Other Certifications:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1 |       | Date Certified |       | Certified By: |       |
| 2 |       | Date Certified |       | Certified By: |       |

**List Courses Taught for RPM Academy in the past two years (include ARC-R and TRC-R)**

**CLASSES TAUGHT FOR YOUR STATE AGENCY DO COUNT FOR RPMA RENEWAL.**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Course** | **Year** |  | **How Many** |  | **Course** | **Year** |  | **How many** |
| **ARC / ARC-R** |       |  |       |  | **TTRC** |       |  |       |
| **TRC / TRC-R** |       |  |       |  | **SRC** |       |  |       |
| **TC** |       |  |       |  | **AORC** |       |  |       |

BY SIGNING THIS APPLICATION/RENEWAL:

* **I AGREE TO UPHOLD AND IMPLEMENT ALL CONCEPTS, IDEALS, AND INSTRUCTOR PREREQUISITES OF THE RPMA INSTRUCTOR PROGRAM.**
* **I AGREE TO COORDINATE ALL COURSES THROUGH THE RPMA COORDINATOR.**
* **I AM CURRENT AT LEVEL III OR ABOVE IN THE RIDER EDUCATION LEVELS PROGRAM.**
* **I ALWAYS RIDE IN PROPER RIDING GEAR.**

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |       | Date: |       |

**RETURN THIS APPLICATION 30 OR MORE DAYS PRIOR TO YOUR SCHEDULED INSTRUCTOR CERTIFICATION CLASS OR YOUR INSTRUCTOR EXPIRATION DATE.**

**MAIL APPLICATION TO.**

**RPM Academy c/o Susan Huttman**

**PO Box 384 Wilkesboro, NC 28697**

**(828) 368-2249**

**susanhuttman@rpmacademy.net**