

## **Hunter Education Instructor Application**

## **Instructions**

- Please complete this form in its entirety. Circle the answer where appropriate.
- When complete, return form to: Hunter Education Program, PO Box 957, Peterborough, Ontario K9J 7A5. or to administrator@ohep.net. Questions call 705-748-5785.

Last Name	First Name	Middle Initial(s)			
Street Address, PO Box, RR#					
City, Town, Village	Postal Code				
Phone number Alternate phone	number Email Address:				
Date of Birth (YY/MM/DD)	Residency: I have lived in Ontario foryears	Outdoors Card Number: 708158			
Occupation Employers Name					
Employers Address	City, Town, Village	Employer Telephone Number			
	English French Other	er			
Officer or Deputy C.O.? MNR .?		Education Instructor ?			
Are you a CFSC Instructor? Yes	<b>No</b> Instructor/Examiner Number:	Yes         No            Expiry Date:			
Are you a graduate of a Hunter Safety Course or Hunter Education Program	Yes No Year:	Where (eg. Ontario)			
Are you a Licensed Trapper? Yes	No Are you a Trapper Instructor? If yes, Certificate No	Yes No. of years as a Trapper?			
I Hunt With: Archery Equipment	Muzzle Loading Firearms Rifle	s Shotguns Other			
	u nunting: Total number of	years hunting experience?			
associating with people who own fire		ation, from having a firearm in your possession or			
Have you ever been found guilty or b If yes give particulars:	een convicted of a criminal offence for w	which you have not received a pardon? Yes No			
How would you rate your understand	ng of The Fish and Wildlife Conservation <b>Poor Fair Good V</b>	on Act and the Regulations?  Yery Good			
Have you ever been found guilty or b Any Provincial/ Territorial Game, Fis Canada's Fisheries Act or Ontario Fis Provincial /Territorial Trapping Regu If yes to any of the above, give partice	h or Wildlife Acts Yes No Can heries Regulations Yes No Ont lations Yes No	nada Migratory Birds Conservation Act Yes No ario's Endangered Species Act Yes No			

If yes, give particulars	ir nunting privileges suspended?	110		
	volved in a hunting incident resulting in an injury	to yourself or another person?	Yes	No
Provide the names of suitability to conduct	two (2) non-family references that have know hunter education training courses in a respon	n you for three years or more and sible and unbiased manner.	can atte	st to your
Mailing Address (Street	et, Town, City)			
Postal Code	Home Telephone Number	Business Telephone N		
Name	( )	( )		
Mailing Address (Stree	et, Town, City)			
Postal Code	Home Telephone Number	Business Telephone N	Number	
List the names and dat required.	es of training courses received or attended (includes	de courses other than firearm related	l) add a so	eparate sheet if
List the names and dat	es of courses or programs that you have taught/do	elivered (include courses other than	firearm r	elated).
Explain why you want	to become a hunter education instructor (add a se	eparate sheet if required)		
	e the Ministry of Natural Resources to conductions deemed to be detrimental to the p			
Print Name	 Date	Signature		