



# Utah Hunter Education Programs

## Bowhunter Education

### Volunteer Instructor Application

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Gender: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Shirt Size: \_\_\_\_\_

#### BOWHUNTER EDUCATION KNOWLEDGE/EXPERIENCE

(Excellent, Good, Fair, No Experience)

Bowhunter Responsibility/Ethics \_\_\_\_\_

Wildlife Conservation/Management \_\_\_\_\_

Archery Equipment Use & Care \_\_\_\_\_

Orienteering \_\_\_\_\_

Elevated Stands, Fall Restraint Systems \_\_\_\_\_

Outdoor Preparedness \_\_\_\_\_

Survival, First Aid \_\_\_\_\_

Shot Placement \_\_\_\_\_

Wildlife Identification \_\_\_\_\_

Animal Recovery Techniques \_\_\_\_\_

Game Sign & Blood Trailing \_\_\_\_\_

Archery Range Supervision \_\_\_\_\_

Working with persons with disabilities \_\_\_\_\_

Years of Bowhunting Experience \_\_\_\_\_

**Have you bowhunted at least three years within the past ten years?**      yes      no

**Are you enrolled in Utah's Dedicated Hunter Program?**      yes      no

**Referred by:** \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Mail:**

**Volunteer Instructor Application  
Authorization for Criminal Background Check  
Agreement for Voluntary Services**

**To: Utah Division of Wildlife Resource  
Hunter Education Program  
1594 West North Temple  
PO Box 146301  
Salt Lake City UT 84114-6301**

Office Use Only
_____ Volunteer Instructor Application
_____ Authorization for Criminal Background Check
_____ Agreement for Voluntary Services
_____ Background Check Completed
_____ Online Training Completed
_____ In-person Training Completed
Certification Date: _____
Certification number: _____