



SC Chapter National Safety Council
121 Ministry Drive
Irmo, South Carolina 29063
(800)-733-6185 • (803)-732-6778 • (803)-732-6757 (Fax)

Alive at 25 Instructor Registration Form

Name: _____

Address: _____

City, State, Zip Code: _____

Home Phone: _____ Cell Phone: _____

Personal Email: _____

Agency Information: _____

Name of Agency: _____

Agency Address: _____

City, State, Zip Code: _____

Work Phone: _____

Supervisor Name: _____

Supervisor Phone: _____

Payment Options (Please check appropriate box):

Invoice Agency _____ P.O. # _____ Scholarship _____

Due to the serious nature of the Alive at 25 Program, please take the time to respond. Complete the application fully so that it reflects your desire to impact lives of 15-25 year olds. All documentation will be reviewed by the selection committee, prior to being accepted into the course.

1. How long have you worked for your current agency? _____

2. How long have you been in Law Enforcement ? _____

3. Do you know any current Alive at 25 instructors? YES NO

If so please list names: _____

4. Once you become a certified Instructor do you have the support of your Law Enforcement Agency to teach the program within your community or other communities in the State?

YES

NO

5.

As an Alive at 25 Instructor we request all potential instructors to commit to teaching a minimum of 5 classes per year to maintain their credentials. Will you be able to adhere to this policy?

YES

NO

If not please explain: _____

The following three questions require lengthy responses please take your time and respond in great detail.

6. Please describe your background in Law Enforcement, and whether or not you have had any teaching experience?

7. Why are you interested in becoming an Alive at 25 Instructor (including personal reasons). Please be detailed

8. What kind of commitment do you think you will have to put into the training class and once you become an instructor? Please be detailed