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SEAS Monmouth - Skipper Certification Application Form

First name:	Last name:
Postal mailing address:	
Email address:	
Cell phone number:	Age Group: ☐ 21+ ☐ 18+ ☐ 13+
Skipper Level (Boat) to be certified:	Current Skipper Level:
SEAS Monmouth Skipper Reference #1 Name, cell phone & email:	
SEAS Monmouth Skipper Reference #2 Name, cell phone & email:	
The most recent date attended SEAS Monmouth Skipper Orientation: MM/DD/YYYY	
Do you have a current New Jersey Boating Safety Certificate?	Yes or No
Have you fully read the SEAS Monmouth Skipper Certification Process website page? https://sailseas.com/Monmouth/skippercert.htm	Yes or No
Have you reviewed the skipper self-checklist for the level skipper that you are requesting to be approved to skipper? https://sailseas.com/Monmouth/skippercert.htm	Yes or No
Have you read the SEAS Monmouth Safety Program manual? https://sailseas.com/Monmouth/downloadable_documents/SEAS_Monmouth_Safety_Guidelines.pdf	Yes or No

Please rate your knowledge and/or use of the following:

Navigation / Paper & Electronic:	Excellent	☐	Good	☐	Fair	☐	None	☐
Tides & Currents:	Excellent	☐	Good	☐	Fair	☐	None	☐
Anchoring & Docking Techniques:	Excellent	☐	Good	☐	Fair	☐	None	☐
Rules of the Road:	Excellent	☐	Good	☐	Fair	☐	None	☐
Seamanship:	Excellent	☐	Good	☐	Fair	☐	None	☐

Documentation to include with this application: A photocopy of your sailing résumé (if applicable) or a list of your sailing experience, a photocopy of your New Jersey Boating Safety Certificate, and photocopies of any other applicable sailing credentials held by you. Two copies of the referrals by the reference skippers listed above. (Empty form can be downloaded **here**)

Please email completed application, documentation, and copy of the receipt of $25 application fee to: SCCommittee@monmouth.sailseas.com with Subject as:
Re: [**Your Name] - SEAS Monmouth Skipper Certification Application**

- *To send the application fee, follow the instructions on the Donation page here.*