

## Boat Operator Certification Certifier and Regional Director Nomination Form

Position (check one):    IN Certifier    CN Certifier    ACN Certifier    ON Certifier IN Certifier Trainer    CN Certifier Trainer    ACN Certifier Trainer    ON Certifier Trainer Certifier Trainer Instructor    Regional Director    Asst Regional Director
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**Nominee's information:**

Name:	Grade:	Cert. No.:
Squadron:	District:	Region:
Address1:	Address2:	
City:	State:	Zip:
Phone:	E-mail:	
Certified Instructor (check one):    Y    N	Years of Boating Experience:	
Has nominee boated at night or in restricted visibility?	Y	N
Is nominee willing and able to observe on-the-water skill demonstrations?	Y	N
Is nominee willing and able to teach other Certifiers (Certifier Trainer and Instructor Certifier Trainer only)?	Y	N
Does nominee have strong leadership and presentation skills (critical for Regional Director, Certifier Trainer and Certifier Trainer Instructor)	Y	N
Does nominee have e-mail and Internet access?	Y	N

**Nominator's information:**

Name:	Grade:	Cert. No.:
Squadron:	District:	Region:
Address1:	Address2:	
City:	State:	Zip:
Phone:	E-mail:	
Position: (check one)    SEO    DEO    ASEO    ADEO		

**Approvals:**

Nominator's Signature:			
<b>Approval: Regional Director or Assistant (for Certifier nominations) or NEO (for Regional Director or Asst. Regional Director nominations)</b>			
Region:	Name:	Cert.:	Signature:

See next page for instructions on filling out this form.

**Instructions for Certifier and Regional Director Nomination Form**

- (1) Verify the nominee’s willingness to serve.
- (2) Circle the position for which the person is being nominated in the box on the top of the form.
- (3) Fill in nominee’s contact information.
- (4) Circle the answers to the yes or no questions
- (5) A year of boating experience is defined as a calendar year or season in which nominee spent at least 15 days on the water.
- (6) Attach a copy of the candidate’s BOC resume. See below for recommended content/format.
- (7) Be sure the nominee meets all requirements for the position they are being nominated for.**
- (8) The Boat Operator Certification Regions are listed below
- (9) Fill in your (nominator’s) information and sign. (The nominator must be the SEO or DEO to nominate a Certifier and must be a DEO to nominate a Regional Director).
- (10) Forward the completed form for approval to the Regional Director (Certifier and Certifier Trainer nominations)
- (11) For Certifier Trainer Instructor, Regional Director or Asst. Regional Director nominations, forward to Regional Director who will submit it to the NEO for consideration.
- (12) The Regional Director or NEO will review the application and either approve it or return it with an explanation as to why it was not approved. Regional Directors should keep records of candidates they have approved and assure they receive training.
- (13) In the absence of the Regional Director, or if delegated to do so, the Assistant Regional Director may act instead of the Regional Director.

If a nominee is approved, the nominator and nominee should:

1. Work with the Regional Director to arrange for the nominee to attend Certifier training.
2. For a Certifier Trainer work with a Certifier Trainer Instructor to become certified.
3. For a Certifier Trainer Instructor, work with the BOCOTWCom to obtain NEO approval.

**District Assignments to Regions**

District	Region	District	Region	District	Region
1	Northeast	12	Northeast	23	Southeast
2	Mid Atlantic	13	Southwest & Pac Isl.	24	Midwest
3	Northeast	14	Northeast	25	Southwest & Pac Isl.
4	Northeast	15	Mid South	26	Southeast
5	Mid Atlantic	16	Northwest	27	Southeast
6	Mid Atlantic	17	Mid South	28	Southwest & Pac Isl.
7	Mid Atlantic	18	Northeast	29	Midwest
8	Southeast	19	Northeast	30	Midwest
9	Midwest	20	Midwest	31	Mid South
10	Midwest	21	Mid South	32	Northwest
11	Mid Atlantic	22	Southeast	33	Caribbean

USPS Boat Operator Certification Certifier Resume  
Minimum Content and Required Format

Name (last, First, Middle name or initial)  
USPS Member Number

USPS Education  
Grade (S, P, AP, JN, N or SN)  
Elective Courses (SA, MES, MCS, WA, CP, etc)  
Expiration Date for ID

CPR Expiration Date

Other boat training and certifications (USCG licenses, ASA or US Sailing certifications, etc)  
Please attach copies of all non-USPS training and certifications

Boat(s) you currently own (size, gross tonnage if applicable, etc)

Sizes of boats you have operated (summary is fine – e.g. operated boat between xx and xx feet long (provide gross tonnage range, if applicable). The majority of boat operation was between xx and xx feet long)

Type of water you have experience operating a boat on. Please provide some indication of how much time was spent operating a boat in each area (e.g. a little, moderate, extensive)

Inland Lakes  
Rivers  
Locks (list or summarize)  
Intercoastal waterway/near shore  
Great Lakes  
Off shore

Summary paragraph of your boating experience.