

# SEAALAS Trainer Award Application



Priority One Services

Full Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Email: \_\_\_\_\_

SEAALAS Member:  Years as a SEAALAS member? \_\_\_\_\_

AALAS Certification:  Level of AALAS certification? \_\_\_\_\_

Are you a member of any other organizations? Please list.

How many years as a lab animal care provider? \_\_\_\_\_

How many years as a lab animal training provider? \_\_\_\_\_

Please describe your methods for staying up-to-date on training techniques:

Please list any trades shows, lectures, or workshops in which you presented your expertise/knowledge:

Can your training methods be adjusted to accommodate a diverse student group? Ex. language barriers, experience levels, etc

Do you teach or promote AALAS certification at you institute? If yes, please elaborate.

*If you need to elaborate further on any of topics above or want to add further support to your application, please attach a letter with all pertinent information.*