

CONNECTICUT REGION – NATIONAL SKI PATROL SYSTEM, INC.
PROGRAM REPORT

LEGAL ADVISOR
AS OF **April 1**, 2024

Please complete and email to
skip.mudge.nsp@gmail.com
-- by April 1, 2024

PROGRAM ADVISOR:		Jonathan Ruhe
CONTACT INFORMATION:	EMAIL ADDRESS:	jruhe@snet.net
	MOBILE PHONE:	860-841=8593

ASSISTANT ADVISOR:	NAME: N/A	CONTACT:
ASSISTANT ADVISOR:	NAME:	CONTACT:

MISSION STATEMENT

NSP: TO HELP KEEP PEOPLE SAFE ON THE MOUNTAIN AND DURING OTHER OUTDOOR ACTIVITIES.
PROGRAM MISSION STATEMENT: Provide Competent Legal Advice to advance NSP’s mission.

EXECUTIVE SUMMARY: 2023-24 SEASON

As Legal Advisor, I provided feedback and opinions related to a number of legal issues and concerns as needed.

PROGRAM GOALS: 2023-24 SEASON

Please list the SMART goals your program focused on this season, along with their achievement status. (Specific, Measurable, Attainable, Relevant and Time bound)

1. Provide legal consultation and opinions as needed.
- 2.
- 3.

ACTIVITIES / PARTICIPATION

Activity	# Instructors/ Other	# Participants
N/A		

PROGRAM GOALS: 2023-24 SEASON

Please list the SMART goals your program focused on this season, along with their achievement status. (Specific, Measurable, Attainable, Relevant and Time bound)

1. Provide legal consultation and opinions as needed.
- 2.
- 3.

RECRUITMENT

Please describe your recruiting efforts to promote your program. This might include participants, staff or others. N/A

SUCCESSION PLANNING

Please discuss your plans for identifying, recruiting and/or mentoring your potential replacement. You do not need to specify the individual(s) here. Explain where you are in the process, number of potential successors, etc. A good succession plan makes it easier for you to advance while ensuring the continued growth of your program.

I am available to provide any consultation to any successive legal advisor.

PROGRAM BUDGET

BUDGET PERFORMANCE (2023-24 SEASON)

Please provide the \$ amount of your approved budget for the prior fiscal year. Please note if this budget included any unusual and/or one-time expenditures. For travel expenses, please specify trips/nights/people/rates, etc., as appropriate.

	APPROVED SEASON BUDGET	SPENT TO DATE	ANTICIPATED REMAINING TO SPEND	VARIANCE (OVER/ UNDER)
Mileage	-0-			
Meals	-0-			
Lodging (# trips/people/nights/rates)	-0-			
Printing	-0-			
Postage	-0-			
Equipment	-0-			
Supplies	-0-			
Textbooks/Instructional Aids	-0-			
Awards specific to program (e.g., Instr. Service Awards)	-0-			
Other (unusual or one time, explain in "Prog. Goals")	-0-			
Revenue (Expense Offset)	-0-			
Total	-0-			
<p>Notes: Please explain variances (i.e., over/underspending your approved budget by >10%). OVERSPENDING OF BUDGET ALLOWED ONLY WITH PRIOR APPROVAL OF REGION DIRECTOR.</p>				

BUDGET REQUEST (2023-24 SEASON)

<i>Please provide a brief comment on any increase or decrease, such as unusual or one-time expenditures. Explain basis for travel expense request.</i>	REQUESTED	APPROVED
Mileage: State Mileage , not dollar amount (round trip 100 miles or more) ¹	-0-	
Meals	-0-	
Lodging (# trips/people/nights/rates)	-0-	
Printing	-0-	
Postage	-0-	
Equipment	-0-	
Supplies	-0-	
Textbooks/Instructional Aids	-0-	
Awards specific to program (e.g., Instructor Service Awards)	-0-	
Other (unusual or one time, explain in "Program Goals")	-0-	
Revenue (Expense Offset)	-0-	
Total	-0-	
Notes:		

¹ If multiple trips, list mileage separately, either in Notes section (above) or as separate lines in Budget Request form.