

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

CT REGION - SENIOR PROGRAM COORDINATOR

AS OF September 24, 2023

PROGRAM ADVISOR:	Becky Mudge	
CONTACT INFORMATION:	EMAIL ADDRESS:	bmudgetsrprogram@gmail.com
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ASSISTANT ADVISOR:	NAME: N/A	CONTACT: N/A
ASSISTANT ADVISOR:	NAME: N/A	CONTACT: N/A

MISSION STATEMENT

NSP: TO HELP KEEP PEOPLE SAFE ON THE MOUNTAIN AND DURING OTHER OUTDOOR ACTIVITIES.
PROGRAM MISSION STATEMENT: To help guide CT Region Senior Program Candidates through the Senior Program process.

EXECUTIVE SUMMARY: 2022-23 SEASON

Provide a brief overview of the past season. Highlights, focal points, key information you want the Region Director and Board to know. These should be tied into the season's Goals.

- 1. Successfully guided (3) Candidates who completed the Senior Program with Senior Classification form, and forwarded to National, with appropriate cc's to necessary CT Region personnel including Region Awards Advisor to obtain Senior status Pin/Certificate and awarded/announced at CT Region Awards Banquet.*
- 2. Multiple email and verbal interactions with Patrollers and Senior Program Candidates to provide information on Senior Program process and requirements.*
- 3. Drafted information provided to Patrol Directors/Sr. Program participants in first year of this role, that was used to define process as placed on CT Region website. Updated Assistant ROA with Senior Program updates to be included on the CT Region website.*
- 4. Collaborated via email with various CT Region Leadership for stronger process to obtain Patrol-Director signed Senior applications by Senior Program Candidates before they enter their first Senior Patroller discipline.*

PROGRAM GOALS: 2022-23 SEASON

*Please list the SMART goals your program focused on **this** season, along with their achievement status. **Refer to last year's report.** (Specific, **M** measurable, **A** attainable, **R** relevant and **T** time bound)*

- 1. Continue to streamline and improve the process by October 1, 2022 (prior to the CT Region Refreshers and ski season).*
- 2. Further Education - Have a clearly defined process and have it accessible on the CT Region website under a Senior Program page.*

ACTIVITIES / PARTICIPATION

Activity	# Instructors/ Other	# Participants
Successfully guided (3) eligible Patrollers with Senior Program Process, including Classification Form to National and Appropriate Region Personnel and Profiles Updated with Senior Alpine Patroller Status		3
Multiple email and verbal interactions with Patrollers and Senior Program Candidates to provide information on Senior Program.		Multiple
Drafted information provided to Patrol Directors/Sr. Program participants in first year of this role, that was used to define process as placed on CT Region Website. Updated Assistant ROA with Senior Program updates to be included on the CT Region website.		Multiple
Collaborated via email with various CT Region Leadership for stronger process to obtain Patrol-Director signed Senior applications by Senior Program Candidates before they enter their first Senior Patroller discipline.		Multiple) (Various CT Region)Leadership)

PROGRAM GOALS: 2023-24 SEASON

Please list your program's SMART goals for next season. (**S**pecific, **M**easurable, **A**ttainable, **R**elevant and **T**ime bound)

1. Transfer the Sr. Coordinator Position and mentor my successor by the beginning of the 2023/2024 ski season.

RECRUITMENT/MARKETING

N/A

SUCCESSION PLANNING

The plan is to transition the Sr. Coordinator Position and mentor my successor this year by the beginning of the 2023/2024 ski season.

PROGRAM BUDGET

1. BUDGET PERFORMANCE (2022-23 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. You may show trip details at the end of the document if you wish.

	APPROVED SEASON BUDGET	SPENT TO DATE	ANTICIPATED REMAINING TO SPEND	VARIANCE (OVER/ UNDER)
Mileage	N/A	N/A	N/A	
Meals	N/A	N/A	N/A	
Lodging (# trips/rooms/nights/rates)	N/A	N/A	N/A	
Printing	N/A	N/A	N/A	
Postage	N/A	N/A	N/A	
Equipment	N/A	N/A	N/A	
Supplies	N/A	N/A	N/A	
Textbooks/Instructional Aids	N/A	N/A	N/A	
Awards specific to program (e.g., Instr. Service Awards)	N/A	N/A	N/A	
Other (unusual or one time, explain in "Prog. Goals")	N/A	N/A	N/A	
Revenue (Expense Offset)	N/A	N/A	N/A	
Total				
Notes: NO BUDGET REQUIRED FOR THIS POSITION/ROLE AT THIS TIME.				

2. 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: (use Mileage Reimbursement Worksheet on following page to calculate expense) ¹		
Meals		
Lodging (# trips/rooms/nights/rates)		
Printing		
Postage		
Equipment		
Supplies		
Textbooks/Instructional Aids		
Awards specific to program (e.g., Instructor Service Awards)		
Other (unusual or one time, explain in "Program Goals")		
Revenue (Expense Offset)		
Total	\$0.00	
Notes: NO BUDGET REQUIRED FOR THIS POSITION/ROLE AT THIS TIME.		

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

3. Mileage Reimbursement Worksheet

Trip from/to	Miles Round Trip	Miles over 100	# trips	Total miles	Amount to be reimbursed
<i>Example: Hartford → Bromley (Sr. OET Clinic)</i>	<i>252</i>	<i>152</i>	<i>2</i>	<i>304</i>	<i>\$106.40</i>
N/A					
Total the far-right column and enter this amount in "2. Budget Request" (prior page) →					