

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

YOUNG ADULT PATROLLER ADVISOR

AS OF April 7, 2025

Please complete and
email to
skip.mudge.nsp@gmail.com
by April 1, 2025

PROGRAM ADVISOR:	Sue-Ellen Repeta
CONTACT INFORMATION:	EMAIL ADDRESS: serepetansp@gmail.com
	MOBILE PHONE: 860-305-4002

ASSISTANT ADVISOR:	NAME:	CONTACT:
ASSISTANT ADVISOR:	NAME:	CONTACT:

MISSION STATEMENT

NSP: TO HELP KEEP PEOPLE SAFE ON THE MOUNTAIN AND DURING OTHER OUTDOOR ACTIVITIES.

PROGRAM MISSION STATEMENT: The Mission of the Young Adult Program is to recruit, educate and develop those young adults with and interest in the ski industry and in particular, ski patrolling by providing an atmosphere that encourages fun, physical fitness, leadership, injury prevention, health and safety education and personal growth.

EXECUTIVE SUMMARY: 2024-25 SEASON

We did not participate in fundraising this fall at the refresher . Unless there is a buy one get one sale on the pizza, there is minimal money made on this sale. Patrollers have become more savvy on bringing their own meals and we have had very little participation by the YAPS. In previous years there was more help from prior YAPS than current YAPS.

CT region was once again invited to SVT YAP day .This year it was held at Hermitage Ski Club.

YAP summit was held at Smugglers Notch in March

PROGRAM GOALS: 2024-25 SEASON

*Please list the SMART goals your program focused on **this** season, along with their achievement status. **Refer to last year's report.** (**S**pecific, **M**easurable, **A**ttainable, **R**elevant and **T**ime bound)*

- 1. Identify a YAP captain at each of the patrols to serve as more local direct line to CT Region YAPs, this person will work with the CT region YAP advisor — no one identified*
- 2. Send out survey to YAPs over summer as to what type of fundraising they want to do for fall, who will be participating, and what type of events they would like to participate in for the 24-25 season and then plan accordingly- not attained*
- 3. Monthly skills practice/assessment drills with local YAP patrol captain- trying to schedule on different weeks at each patrol so that neighboring YAPs can go to different mountain in the CT region and grow a YAP network that could potentially result in YAPS getting together once a week to practice skills- Not attained*

ACTIVITIES / PARTICIPATION

Activity	# Instructors/ Other	# Participants
SVT YAP day		
Smugglers Notch ED YAP Summit		

PROGRAM GOALS: 2025-26 SEASON

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

- 1. Find new CT region YAP advisor*
- 2. Hand off YAP equipment to New Advisor*
- 3. Find YAP contact person at each of the CT areas that has YAPS*

RECRUITMENT/MARKETING

Sign up at OEC refresher, social media accounts, CT region website

SUCCESSION PLANNING

Informed CT Region Director that I will be stepping down as YAP advisor this year. Ideally we will find an advisor that is an instructor in both OEC and OET who works well with young adults , was a former YAP or has some sort of close tie or passion for working with young adults. Notice of need for new advisor was listed on CT region web site.

PROGRAM BUDGET

1. BUDGET PERFORMANCE (2024-25 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				
Meals	750.00	0.00	0.000	(750.00)
Lodging (# trips/rooms/nights/rates)				
Printing				
Postage				
Equipment				
Supplies				
Textbooks/Instructional Aids				
Awards specific to program (e.g., Instr. Service Awards)				
Other (unusual or one time, explain in "Prog. Goals")				
Revenue (Expense Offset)				
Total	750.00	0.00	0.00	(750.00)
Notes: Please explain variances (i.e., over/underspending your approved budget by >10%). OVERSPENDING OF BUDGET ALLOWED ONLY WITH PRIOR APPROVAL OF REGION DIRECTOR.				

2. BUDGET REQUEST (2025-26 SEASON)

Please provide a brief comment on any increase or decrease, such as unusual or one-time expenditures. Explain basis for travel expense request.	REQUESTED	APPROVED
Mileage: (use Mileage Reimbursement Worksheet on following page to calculate expense) ¹		
Meals	750.00	
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	750.00	
Notes: requesting 750.00 as I anticipate bringing on a assistant advisor and this would cover amount will cover cost of ED YAP summit for advisor and ½ cost for ED YAP summit for assistant advisor		

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>
Total the far-right column and enter this amount in "2. Budget Request" (prior page) ☐					