



THOMPSON RIVERS UNIVERSITY

Adventure Studies Department

adventure@tru.ca

SUPPLEMENTAL DOCUMENT CHECKLIST

Please send all documents to:

**Thompson Rivers University – Adventure Studies, OM1251
805 TRU Way, Kamloops, British Columbia, Canada, V2C 0C8**

OR

PDF files ONLY to adventure@tru.ca

1. **Complete** a TRU Application. Apply on line at www.tru.ca
2. **Transcripts.** To complete your application you will need to submit Official High school and all post-secondary transcripts. Transcripts need to be send to Attn: TRU Admissions
3. **Student Information Form.** Fill out the Student Information Form as completely and accurately as possible.
4. **Cover letter.** Enclose a cover letter stating your adventure activity experience, 5-year education/career plan, why you wish to attend this program, and how the program will help you attain your goals.

Briefly outline the skills and attributes you bring to the program and how these will have a positive effect on your learning, your peers, the instructors, and the program as a whole.
5. **Resume.** Enclose an employment resume.
6. **Letters of reference.** Enclose **TWO** reference letters that speak to your character and personality.
7. **Outdoor Experience Log.** Fill out completely the attached Outdoor Experience Log, the more information the better and be sure to list any certifications you hold.
8. **Information session.** You must participate in a program information session either in-person or via telephone conferencing.



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STUDENT INFORMATION FORM and OUTDOOR EXPERIENCE LOG SHEETS

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A. PERSONAL INFORMATION FORM

1. NAME

Last First Middle

Cell Phone Home Phone Email

2. PROGRAM INFORMATION SESSION ATTENDED: YES NO

DATE LOCATION

3. HOW DID YOU HEAR ABOUT THE ADVENTURE GUIDE PROGRAM (circle all that apply)?

FRIEND/ FAMILY INDUSTRY PARTNER WEBSITE SOCIAL MEDIA

4. WILL YOU BE FURTHERING YOUR EDUCATION BY COMPLETING THE:

ADVENTURE GUIDE DIPLOMA - YES NO

BACHELOR DEGREE- YES NO

5. ARE YOU INTERESTED IN TAKING THE ADVENTURE GUIDE CERTIFICATE AT THE KEILIR HEALTH ACADEMY IN ICELAND?

YES NO



THOMPSON RIVERS UNIVERSITY

ADVENTURE STUDIES DEPARTMENT

B. EMPLOYMENT HISTORY

1. FORMER EMPLOYERS (list last two)

(Include name of person who supervised you)

Dates	Name & Address of Employer	Position Held

May we contact the employers/supervisors above? Yes / No

2. EMPLOYMENT RESUMÉ. Please attach an employment resumé.

- List your work experience chronologically, starting with the most recent employment.
- List your responsibilities and duties.

C. PRACTICAL TECHNICAL EXPERIENCE

1. Previous Adventure Activity Instruction Taken

ORGANIZATION/SCHOOL	TYPE OF COURSE	LENGTH OF COURSE	YEAR	LOCATION

2. **Outdoor Experience and Adventure Activity Training**, on the following pages please describe your technical experience.

OTHER ADVENTURE SPORTS/ ACTIVITIES INFORMATION							
	DATE	LOCATION	ACTIVITY /	ROUTE	LENGTH	DIFFICULTY	ROLE
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