

GSAR PROGRAM COMPLETION ROSTER

SAR GROUP:

**LEAD
INSTRUCTOR:**

PHONE:

CERTIFICATES:

- ☐ MAIL TO STUDENTS
☐ MAIL TO LEAD INSTRUCTOR

**MAILING
ADDRESS:**

If mailing certificates
to Lead Instructor

SUBMIT TO JIBC SAR TRAINING

Justice Institute of British Columbia
Emergency Management Division
715 McBride Blvd., New Westminster, BC V3L 5T4
Fax: 604.528.5798 | Email: sar@jibc.ca

RECORD OF COMPLETION

#	LAST NAME	FIRST NAME	EMRG-1703 Intro to SAR in BC	EMRG-1200 ICS Level 100	EMRG-1701 GSAR Orientation & Safety Guidelines	EMRG-1702 Intro to Search Management	EMRG-1705 Navigation Skills	EMRG-1706 Wilderness Survival for GSAR	EMRG-1704 GSAR Skills	JIBC USE ONLY Requirements Confirmed
1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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FOR ADMINISTRATIVE PURPOSES ONLY

Approved JIBC (Initials)	Date	Student Records Updated (Initials)	Date	Certificates Mailed (Initials)	Date

Signature of Lead Instructor

Date