

Course #: _____ Candidate Name: _____ CSPA #: _____

CSPA
Jumpmaster
Portfolio
for

_____, # _____

(print candidate name)



Send a copy of your completed portfolio to:

CANADIAN SPORT PARACHUTING ASSOCIATION

204-1468 Laurier Street, Rockland, Ontario, K4K 1C7

office@cspa.ca

Fax (613) 916-6008

Course #: _____ Candidate Name: _____ CSPA #: _____

Jumpmaster Technical Course Completion

This certifies that:

Candidate Name _____ CSPA # _____

Has attended the Jumpmaster course and
_____ has completed the technical course. IAD S/L

_____ requires make-up prior to participating in practical components for certification
(Make-up form to be filled in by Learning Facilitator.)

This Jumpmaster temporary rating **Expires** on:

_____ Day _____ Mon _____ Year (One year from date of the Jumpmaster course)

Course number:

Course Location: _____ Province: _____

Learning Facilitator:

LF Signature: _____

I acknowledge the above evaluation of my abilities during this course and verify that I must dispatch 6 students via IAD/SL under supervision prior to dispatching unsupervised and completing the practical portion of this rating.

Candidate's Signature

Course #: _____ Candidate Name: _____ CSPA #: _____

Important Steps:

1. Dispatch 6 students, while being directly observed by a certified Jumpmaster on each load.
2. **AFTER** completing the 6 students from step #1 above, then you may begin to fill in your Contact Sheet (page 7), starting at #1 with your first student which you dispatch **AFTER** the final observation load.

DO NOT fill in the Contact Sheet on page 7 until **AFTER** you have completed, satisfactorily, the 6 Observed Student Dispatches by a Certified Jumpmaster.

Congratulations on earning the CSPA Jumpmaster temporary rating. To certify your rating, you must complete the following items prior to the expiry date stated in your portfolio:

1. Dispatch 25 students via IAD/SL
 - **AFTER** your DZ checkout by a certified, highly experienced Jumpmaster where you are to complete dispatching 6 students under direct supervision. Keep a record of your student dispatches on the dispatch form and when complete have it signed by a Certified Jumpmaster or Course Facilitator.

or

2. Dispatch 25 FF students if pursuing Jumpmaster (Restricted) Rating. (After Dispatching 6 FF Students supervised by a Certified JM)

Once you have completed the above requirements, please do the following:

1. **Keep a photo copy of the Portfolio for your own personal records**, and
2. Email a scanned copy of the portfolio to office@cspa.ca. The scanned copy must be legible and “full” sized high-resolution (not reduced).

Once this is done and approved, a new CSPA affiliation card will be sent to you with the new rating and you will be a Certified Jumpmaster with the CSPA. You will have to renew your CSPA affiliation and your rating according to the currency requirements outlined by CSPA.

If you do not complete the requirements before the 1-year expiry date in your portfolio you may request a temporary rating extension with a valid reason (see page 8). The Extension Request must be signed off by an SSE and the Portfolio must be submitted to the Office (office@cspa.ca) for processing the Extension Request. There is a \$25 fee for the Extension Request.

Coaching and Instructing is a rapidly developing area of our sport. Strive to keep yourself updated with new ideas in safety and techniques. Feel free to contact the CWC with any questions, comments or ideas that you may have at Ratings@cspa.ca.

Note: this page does not need to be sent to CSPA

Jumpmaster Dispatch Evaluation Form – Dispatch Load #1

Student Briefing:	All stages covered	0.2	0.4	0.6	0.8	1.0
Equipment Selection		0.2	0.4	0.6	0.8	1.0
Ground Rehearsal:	Correct content	0.2	0.4	0.6	0.8	1.0
	Sufficient repetition	0.2	0.4	0.6	0.8	1.0
	Realistic (training aids)	0.2	0.4	0.6	0.8	1.0
Landing briefing (winds, spot, ground control, etc)		0.2	0.4	0.6	0.8	1.0
Safety Check / Pin Check		0.2	0.4	0.6	0.8	1.0
Aircraft Loading		0.2	0.4	0.6	0.8	1.0
Pilot Briefing		0.2	0.4	0.6	0.8	1.0
Aircraft Safety (helmets on, take off rules, etc)		0.2	0.4	0.6	0.8	1.0
Orientation Pass		0.2	0.4	0.6	0.8	1.0
Mental Rehearsal		0.2	0.4	0.6	0.8	1.0
Verbal Review		0.2	0.4	0.6	0.8	1.0
Stress assessment / relaxation techniques		0.2	0.4	0.6	0.8	1.0
In-flight handles check		0.2	0.4	0.6	0.8	1.0
Pilot Chute / Static Line Preparation (on time/in control)		0.2	0.4	0.6	0.8	1.0
Commands (door , cut , get ready)		0.2	0.4	0.6	0.8	1.0
Spotting (slow climb out, obstacles)		0.2	0.4	0.6	0.8	1.0
Assist Students exit		0.2	0.4	0.6	0.8	1.0
Control Pilot Chute and Bridle / Static Line		0.2	0.4	0.6	0.8	1.0
Skill Area Tasks (Spot, Canopy Control, Safety check)		0.2	0.4	0.6	0.8	1.0
Debriefing:	Awareness	0.2	0.4	0.6	0.8	1.0
	Constructive Correction	0.2	0.4	0.6	0.8	1.0
	Fault Practice/Goal Setting	0.2	0.4	0.6	0.8	1.0
	Record Jumps	0.2	0.4	0.6	0.8	1.0

A Minimum of 20 is required to pass _____ /25

I, _____ a **Certified JM** and CSPA # _____, verify that (# Students ____) IAD/ SL
 (Print Evaluator’s Name)

dispatches were made under my direct supervision, evaluated by myself and found to be satisfactory.

Signature _____ Date _____

Jumpmaster Dispatch Evaluation Form – Dispatch Load #2

Student Briefing:	All stages covered	0.2	0.4	0.6	0.8	1.0
Equipment Selection		0.2	0.4	0.6	0.8	1.0
Ground Rehearsal:	Correct content	0.2	0.4	0.6	0.8	1.0
	Sufficient repetition	0.2	0.4	0.6	0.8	1.0
	Realistic (training aids)	0.2	0.4	0.6	0.8	1.0
Landing briefing (winds, spot, ground control, etc)		0.2	0.4	0.6	0.8	1.0
Safety Check / Pin Check		0.2	0.4	0.6	0.8	1.0
Aircraft Loading		0.2	0.4	0.6	0.8	1.0
Pilot Briefing		0.2	0.4	0.6	0.8	1.0
Aircraft Safety (helmets on, take off rules, etc)		0.2	0.4	0.6	0.8	1.0
Orientation Pass		0.2	0.4	0.6	0.8	1.0
Mental Rehearsal		0.2	0.4	0.6	0.8	1.0
Verbal Review		0.2	0.4	0.6	0.8	1.0
Stress assessment / relaxation techniques		0.2	0.4	0.6	0.8	1.0
In-flight handles check		0.2	0.4	0.6	0.8	1.0
Pilot Chute / Static Line Preparation (on time/in control)		0.2	0.4	0.6	0.8	1.0
Commands (door , cut , get ready)		0.2	0.4	0.6	0.8	1.0
Spotting (slow climb out, obstacles)		0.2	0.4	0.6	0.8	1.0
Assist Students exit		0.2	0.4	0.6	0.8	1.0
Control Pilot Chute and Bridle / Static Line		0.2	0.4	0.6	0.8	1.0
Skill Area Tasks (Spot, Canopy Control, Safety check)		0.2	0.4	0.6	0.8	1.0
Debriefing:	Awareness	0.2	0.4	0.6	0.8	1.0
	Constructive Correction	0.2	0.4	0.6	0.8	1.0
	Fault Practice/Goal Setting	0.2	0.4	0.6	0.8	1.0
	Record Jumps	0.2	0.4	0.6	0.8	1.0

A Minimum of 20 is required to _____ /25
pass

I, _____ a **Certified JM** and CSPA # _____, verify that (# Students ____) IAD/ SL
(Print Evaluator's Name)

dispatches were made under my direct supervision, evaluated by myself and found to be satisfactory.

Signature _____ Date _____

Jumpmaster Dispatch Evaluation Form – Dispatch Load #3 (If Required)

Student Briefing:	All stages covered	0.2	0.4	0.6	0.8	1.0
Equipment Selection		0.2	0.4	0.6	0.8	1.0
Ground Rehearsal:	Correct content	0.2	0.4	0.6	0.8	1.0
	Sufficient repetition	0.2	0.4	0.6	0.8	1.0
	Realistic (training aids)	0.2	0.4	0.6	0.8	1.0
Landing briefing (winds, spot, ground control, etc)		0.2	0.4	0.6	0.8	1.0
Safety Check / Pin Check		0.2	0.4	0.6	0.8	1.0
Aircraft Loading		0.2	0.4	0.6	0.8	1.0
Pilot Briefing		0.2	0.4	0.6	0.8	1.0
Aircraft Safety (helmets on, take off rules, etc)		0.2	0.4	0.6	0.8	1.0
Orientation Pass		0.2	0.4	0.6	0.8	1.0
Mental Rehearsal		0.2	0.4	0.6	0.8	1.0
Verbal Review		0.2	0.4	0.6	0.8	1.0
Stress assessment / relaxation techniques		0.2	0.4	0.6	0.8	1.0
In-flight handles check		0.2	0.4	0.6	0.8	1.0
Pilot Chute / Static Line Preparation (on time/in control)		0.2	0.4	0.6	0.8	1.0
Commands (door , cut , get ready)		0.2	0.4	0.6	0.8	1.0
Spotting (slow climb out, obstacles)		0.2	0.4	0.6	0.8	1.0
Assist Students exit		0.2	0.4	0.6	0.8	1.0
Control Pilot Chute and Bridle / Static Line		0.2	0.4	0.6	0.8	1.0
Skill Area Tasks (Spot, Canopy Control, Safety Check)		0.2	0.4	0.6	0.8	1.0
Debriefing:	Awareness	0.2	0.4	0.6	0.8	1.0
	Constructive Correction	0.2	0.4	0.6	0.8	1.0
	Fault Practice/Goal Setting	0.2	0.4	0.6	0.8	1.0
	Record Jumps	0.2	0.4	0.6	0.8	1.0

A Minimum of 20 is required to pass _____ /25

I, _____ a **Certified JM** and CSPA # _____, verify that (# Students ____) IAD/ SL
 (Print Evaluator's Name)

dispatches were made under my direct supervision, evaluated by myself and found to be satisfactory.

Signature _____ Date _____

Jumpmaster Student Record

Note 1 – Dropzone Checkout (6 Students) must be completed **PRIOR** to this form being filled in

Note 2 – All 25 Dispatches for JM (IAD) or JM (SL) must be by the appropriate method (i.e. **do not record** FF Students on this Student Record)

Note 3 – Temporary JMs who decide to obtain a JM(R) Rating can record a mixture of IAD/SL/FF Students on this Student Record as part of the certification of their JM(R)

#	Date	Student's Name	Student's Jump #	Skill Performance Outcome (Include Dispatch Method: IAD or SL)	Certified JM Verification (Name, CSPA #)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					

Course #: _____ Candidate Name: _____ CSPA #: _____

Practical Experience Document

Name: _____

CSPA #: _____

Total Number of Jumps: _____ Jumps made in last year: _____ Years in Sport: _____

Number of IAD/SL/FF dispatches since DZ Checkout by a Certified Jumpmaster:

IAD's _____ SL _____ FF _____

I wish to (check one):

Upgrade to JM Certified (Circle: IAD SL Restricted)

Gain an extension due to: (**Note - \$25 Fee for Extension Request.** List reason for extension request)

Visa/MasterCard #: _____ Exp. Date: _____

Reason(s) for extension:

I certify that the information in this portfolio is a true and accurate representation of my experience as a rating holder.

Candidate's Signature

Date (day/mon/year)

Email

Verification by Certified SSE: I have inspected the portfolio of the above named individual and find the information contained in this portfolio to be an accurate record of their experience.

Verification Signature

Date (day/mon/year)

Verification Name (Print)

CSPA #