



# Application for the mindDog Trainers Group

Please send completed form to

mindDog  
p o box 797,  
surry hills nsw 2010

or email to  
info@minddog.org.au

enquiries to  
0410 366 046

01/19

Payment of \$110 to be made to Psychiatric Service Dog Assoc, Account number 284620 BSB: 032023.

## Your details

Name \_\_\_\_\_

Date of Birth DD/MM/YYYY \_\_\_\_/\_\_\_\_/\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

P/code

Postal Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

P/code

Mobile \_\_\_\_\_ Email \_\_\_\_\_

## Affiliations

Are you a member of the Delta Professional Dog Trainers' Association?    yes     no

Are you a member of the Pet Professional Guild Australia?    yes     no

Are you a member of any other professional dog trainers' organisation?    yes     no

Name \_\_\_\_\_

## Qualifications

Do you have a Certificate IV in Companion Animal Services?    yes     no

Have you trained assistance dogs before?    yes     no

For which organisation? \_\_\_\_\_

Do you have a First Aid Certificate    yes     no

Do you have a current public liability insurance policy?    yes     no

Do you, or does anyone amongst your family and friends, now or in the past, have a mental health disorder?    yes     no

Please list any other formal dog related qualifications you have.

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Please list any informal dog related experience you have.

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List the personality traits you think a mindDog trainer needs.

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\_\_\_\_\_

Signed

Date DD/MM/YYYY \_\_\_\_/\_\_\_\_/\_\_\_\_

Please attach copies of relevant qualifications.