



# Wyoming Game and Fish Department Hunter Education Program

5400 Bishop Blvd. Cheyenne, WY 82006

Email: [wgfhuntered@wyo.gov](mailto:wgfhuntered@wyo.gov)

Phone: (307) 777-4542



## Volunteer Hunter Education Instructor Position Description

Certified Volunteer Instructors teach students how each hunter should demonstrate safety, ethical behavior and responsibility to themselves, landowners, other hunters, and our natural resources. Read below to see if becoming a certified volunteer instructor is for you!

### Types of Volunteer Instructors

- Hunter Education Instructor
- Assistant Hunter Education Instructor
- Junior Hunter Education Instructor (age 14-17)
  
- Bowhunter Education Instructor
- Assistant Bowhunter Education Instructor
- Junior Bowhunter Education Instructor (age 14-17)

### Instructor Responsibilities

- Teach hunter education courses in teams of two or more instructors.
- Reserve a venue for all tentative dates of the course.
- Set up and manage the course registration through the Game and Fish Event Manager website.
- Create the course schedule (plan when each curriculum component will be taught) and coordinate teaching with other instructors.
- Teach required components of the hunter education or bowhunter education course to all ages.
- Administer firearm handling practical.
- Administer a 50-question test.
- Coordinate and executing logistics for a range day if instructors desire.
- Manage roster, and report final grades and scores for legal certifications.

### Assistant Instructor Responsibilities:

- Help with venue logistics
- Help manage course registration through the WGFD Event Manager website
- Help with a classroom set up and clean up
- Help administer the firearm handling practical
- Help administer and grade the final exam
- Help submit final course report for legal records

### Time Commitment

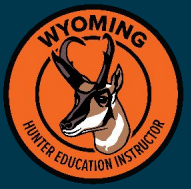
- Teach or assist with at least one 12-18 hour course every two years, at a minimum.
- Attend occasional meetings or training workshops hosted by WGFD Hunter Ed Program.

### Benefits

- Positively influence the members of your community while passing on Wyoming's hunting heritage.
- Assist/mentor new hunters about firearm safety, responsibility, respect and ethics.
- FREE Subscription to *Wyoming Wildlife* magazine
- Earn awards based on hours and years of service volunteered
- Qualify for discount programs for merchandise through multiple retail companies



# Becoming a Hunter Education Instructor



## Eligibility Requirements

- Must be 14-17 years old for Junior Instructors.
- Must be at least 18 years old for all other Volunteer Instructors.
- Must complete all applications and pass all background checks.
- Have a valid Hunter Education card (from WY or another state).
- Have experience in the use of firearms, hunting, and outdoor skills.
- Must have an email address and access to a computer.

## Certification Process

1. Fill out the Hunter Education Instructor Application Packet with a waiver for a wildlife violations check at no cost to you.

Please email the Application Packet to [katie.simpson@wyo.gov](mailto:katie.simpson@wyo.gov) or mail it to:

Wyoming Game and Fish Department  
c/o Hunter Education  
5400 Bishop Blvd  
Cheyenne, WY 82006

2. Complete and pass a federal criminal background check at no cost to you through a secure online form.

- Once The Hunter Education Coordinator receives the Application Packet, a secure link for the background check will be emailed to you.
- A wildlife violation background check will also be completed

3. If the applicant passes all background checks, they must complete the policy, protocol and curriculum training at a Hunter Education Academy

- New Hunter Education Academies are offered in late winter and early spring
  - Check the [WGFD Hunter Education](#) website for dates and locations
- Travel may be required, but compensation may be provided.

4. Participate in at least one full hunter education class with an approved mentor instructor.

- Learn to submit paperwork for hunter education classes.
- Lead at least one unit, completing a lesson plan and activity for the unit.
- Mentoring instructors will complete and submit an evaluation of the trainee instructor.
- Additional training is required to be certified to lead an Internet Completion Course.

If you have questions, please contact the Wyoming Hunter Education Coordinator at 307-777-4542 or email: [wgfhuntered@wyo.gov](mailto:wgfhuntered@wyo.gov)

**WYOMING GAME AND FISH DEPARTMENT  
VOLUNTEER SERVICE AGREEMENT  
ISSUE DATE: November 15, 2022**

GFVP-1

**Parties:** This Agreement is entered into by the Wyoming Game and Fish Commission, by and through the Wyoming Game and Fish Department, located at 5400 Bishop Boulevard, Cheyenne, Wyoming, 82006, and *Volunteer*, as identified below.

**Volunteer Identity and Information:** (Type or print)

Volunteer Name: (Last) \_\_\_\_\_, (First) \_\_\_\_\_, (MI) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Home or Cell Phone No. \_\_\_\_\_ Work Phone No. \_\_\_\_\_

Date of Birth \_\_\_\_\_

Valid Email address: \_\_\_\_\_ (Required for background check process)

Social Security No: \_\_\_\_\_ (Required for Workers Compensation coverage)

Emergency Contact Information: \_\_\_\_\_

\_\_\_\_\_  
(Name / Contact Number / Relationship to Volunteer)

**Purpose and Consideration:** Volunteer agrees to perform services for the Commission and does not receive direct or indirect compensation. The Commission agrees to provide Volunteer the opportunity to participate in Commission approved projects (Projects) and any insurance coverage provided in accordance with state law, in consideration for the work performed by Volunteer.

**Term of Agreement:** The term of this Agreement extends to the scope of a Volunteer's activity while participating in a Commission project. This Agreement is subject to any amendments of the Wyoming Worker's Compensation Act (Wyo. Stat. §§ 27-14-101, et seq.) or other law which may substantively affect the terms of this Agreement.

**Termination of Agreement:** Either party, may terminate this Agreement upon written notice.

**Entirety of Contract:** This two (2) page Agreement represents the entire and integrated Agreement and supersedes all prior negotiations, representations and agreements, whether written or oral.

**Sovereign Immunity:** The State of Wyoming reserves sovereign immunity and the Wyoming Game and Fish Commission and its Department, each expressly reserve governmental immunity, pursuant to Wyoming Statute § 1-39-104(a). The State, Commission and Department specifically retain all immunities and defenses available to them as sovereign or governmental entities pursuant to Wyoming Statutes §§ 1-39-101, et seq. and all other applicable law. Designations of venue, choice of law, enforcement actions and similar provisions shall not be construed as a waiver of immunity. The parties agree that any ambiguity in this Agreement shall not be strictly construed, either against or for either party, except that any ambiguity as to immunity shall be construed in favor of sovereign and governmental immunity.

**Indemnification:** Volunteer agrees to release, indemnify, and hold harmless the State, Commission and Department and their officers, agents, employees, and volunteers from any and all claims, suits, liabilities, court awards, damages, costs, attorney's fees, and expenses arising out of the Volunteer's failure to follow the obligations of this agreement, Commission and Department rules, or in connection with any negligent action or damage arising out of Volunteer's negligence or other tortious conduct.

**Notification:** Volunteer agrees to immediately notify the Department or its representative in the event Volunteer is involved in any accident or exposed to any potential liability while performing assigned duties, services or otherwise participating in a Project.

**Liability and Insurance:** Volunteer is deemed to be a public employee without compensation (Wyo. Stat. § 1-39-103(a)(iv)(A)) and as such may be protected from civil liability while acting within the scope of project duties (Wyo. Stat. §§ 1-39-101, et seq.). Accordingly, Workers' Compensation Insurance may be provided to Volunteer (Wyo. Stat. § 27-14-108(e)(x)). State insurance limits are described in Wyoming Statute §1-39-118.

**Background Checks:** Prior to participation in a Project or operating a state vehicle, Volunteer understands and agrees to submit to and receive a positive review from any Department approved background check required by the Department.

**Vehicle Liability:** Volunteer understands and agrees to not operate a state vehicle unless such operation is authorized by the Department or its representative who supervises Volunteer. Volunteer also agrees to provide the Department a copy of Volunteer's vehicle insurance coverage prior to the operation of Volunteer's own personal vehicle for the purpose of carrying out Project activities, duties or transportation for Project purposes.

**Non-Discrimination:** The Commission is strongly committed to providing a working environment free of sexual harassment or any form of discrimination. Copies of the Department policy on discrimination and sexual harassment may be obtained by contacting the Department's Human Resource Office. Volunteer shall abide by the terms of the policy and shall follow the procedures contained in the policy if exposed to any other form of discrimination, sexual harassment or other similarly prohibited conduct. The Department actively supports the Americans with Disabilities Act (ADA) and reasonably accommodates persons with disabilities who wish to volunteer.

**Signatures and Acknowledgment:** By signing this Agreement, Volunteer certifies to have read and understand this Agreement, and agrees to be bound by its terms and conditions, Volunteer also certifies to have the authority to sign it. Volunteer also understands and agrees that this is a legal contract that is not valid until signed by the parties. Volunteer is advised to seek legal advice from an attorney prior to executing this Agreement.

In addition, by signing this Agreement Volunteer expressly authorizes the Department to investigate Volunteer's criminal history and driving record, as the Department deems appropriate. Volunteer also grants consent to the custodian of any such records to release said information to the Department. This consent is intended to release the custodian of any such records from all and any liability for releasing the requested information to the Department.

\_\_\_\_\_  
Printed Name  
Adult Volunteer

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*\*\*\*\*

\_\_\_\_\_  
Printed Name(s)  
Minor Child Volunteer(s)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name  
Parent/Guardian of Child Volunteer

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\*\*\*\*\*

\_\_\_\_\_  
Printed Name  
Department Project Supervisor

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**WYOMING GAME AND FISH DEPARTMENT - VOLUNTEER SERVICE  
RELEASE OF LIABILITY AND MEDICAL CONSENT AGREEMENT**

\* All Volunteers must understand and voluntarily sign this release to participate in a volunteer activity or project. \*

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I hereby certify that I am at least 18 years of age and a Volunteer for a Commission approved volunteer project (Project). I voluntarily enter into this Release of Liability and Medical Consent Agreement (Agreement). Alternatively, I hereby certify that I am the parent or guardian having legal custody of a minor child Volunteer, on whose behalf I consent to and voluntarily agree to enter this Agreement. In this document, the term "Volunteer" means an adult volunteer or minor child volunteer on whose behalf the lawful parent or guardian is agreeing to the terms of this liability waiver and medical consent agreement.

By signing this Agreement, Volunteer agrees to hold harmless, release and waive all claims against the State of Wyoming, the Wyoming Game and Fish Commission and its Department, and its officers, agents, employees, and volunteers (collectively the Released Parties) from any and all liability or cause of action arising out of any personal injury or death, loss of property, and any other loss, damage, or expense of any kind arising out of the Volunteer's association with, participation in, or any involvement or activity related to a Commission approved project (Project).

This Agreement is effective upon Volunteer's signature and acceptance to participate in a Project. This Agreement is valid for a three year period; beginning the date of execution. However, the terms of this Agreement extend only to the scope of Volunteer's participation in any Project.

**Volunteer Acknowledgement:** By signing this Agreement, Volunteer is certified to be in good health and has not been diagnosed with, nor has any health issues that preclude Volunteer from safe participation in a Project. Volunteer knows and understand the fitness level required to participate in a Project and has maintained the health and fitness level necessary to fully and safely participate. By signing this Agreement, the Volunteer understands and agrees to abide by all rules of safety and conduct prescribed for Department volunteers. If Volunteer is a minor child, the legal parent or guardian agrees to encourage and instruct the child to follow all rules of safety or conduct prescribed for participation in a Project. Volunteer acknowledges and accepts that any violations of the Released Parties' or facility rules may result in immediate termination of participation in and removal from the Project.

**Emergency Medical Care Authorization:** Volunteer understands that a Project may expose Volunteer to indoor facilities, outdoor terrain or outdoor activities. **Volunteer understands and agrees that there are inherent risks of physical injury, illness, or death associated with participation in a Project.** Volunteer further consents to receive first aid and any other emergency medical treatment in the event of an injury or illness incurred during participation in a Project. Volunteer gives permission for the Released Parties to seek emergency medical services, should Volunteer become injured or ill during participation in a Project. Volunteer gives permission to receive medical assistance, with the full and complete understanding that Volunteer is deemed to be a public employee without compensation (Wyo. Stat. § 1-39-103(a)(iv)(A)) and may be protected from civil liability while acting within the scope of project duties (Wyo. Stat. §§ 1-39-101, et seq.). Workers' Compensation may also be provided to Volunteer in the event of an injury or illness incurred during Project participation (Wyo. Stat. § 27-14-108(e)(x)).

**Indemnification:** Volunteer releases, indemnifies, and holds harmless the Released Parties, and their officers, agents, employees, and volunteers from any and all claims, suits, liabilities, court awards, damages, costs, attorney's fees, and expenses arising out of Volunteer's failure to follow the obligations of this agreement, Commission rules, or in connection with any negligent action or damage arising out of Volunteer's negligence or other tortious conduct.

**Governmental Immunity:** Volunteer acknowledges that by entering into this Agreement, the State of Wyoming reserves sovereign immunity and the Wyoming Game and Fish Commission and its Department each expressly reserve governmental immunity, pursuant to Wyoming Statute § 1-39-104(a). **The Wyoming Game and Fish Commission and its Department specifically retain all immunities and defenses available to them as governmental entities pursuant to Wyoming Statutes §§ 1-39-101, et seq. and all other applicable law.** Designations of venue, choice of law, enforcement actions and similar provisions shall not be construed as a waiver of immunity. The parties agree that any ambiguity in this Agreement shall not be strictly construed, either against or for either party, except that any ambiguity as to immunity shall be construed in favor of sovereign and governmental immunity.

**Signatures and Acknowledgment:** By signing this Agreement, Volunteer certifies to have read and understand this Agreement, and agrees to be bound by its terms and conditions, Volunteer also certifies to have the authority to sign it. Volunteer is advised to seek legal advice from an attorney prior to executing this Agreement.

\_\_\_\_\_  
Printed Name  
Adult Volunteer

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*\*\*\*\*

\_\_\_\_\_  
Printed Name(s)  
Minor Child Volunteer(s)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name  
Parent/Guardian of Child Volunteer

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\*\*\*\*\*

\_\_\_\_\_  
Printed Name  
Department Project Supervisor

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



WYOMING GAME AND FISH DEPARTMENT
Hunter Education Instructor Application

(2.2023)



Please check the box for the program(s) you are applying for

- Hunter Education Instructor [ ] Junior Hunter Education Instructor (age 14-17) [ ]
Bowhunter Education Instructor [ ] Junior Bowhunter Education Instructor (age 14-17) [ ]
Assistant Hunter Education Instructor [ ] Assistant Bowhunter Education Instructor [ ]

\* Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Gender: \_\_\_\_\_

Hunter Education certificate number: \_\_\_\_\_ State of Issue: \_\_\_\_\_ Date of Issue: \_\_\_\_\_

Bowhunter Education certificate number: \_\_\_\_\_ State of Issue: \_\_\_\_\_ Date of Issue: \_\_\_\_\_

Race/Ethnicity please check all that apply: [ ] American Indian or Alaska Native [ ] Asian [ ] Black or African American
[ ] Hispanic/Latinx [ ] Native Hawaiian or Other Pacific Islander [ ] White/Caucasian [ ] I prefer not to answer

Please note that to become a hunter ed/bowhunter ed instructor it is mandatory to provide an email address, at least one phone number and proof that you have taken a hunter/bowhunter education class.

[ ] Check this box only if you would like your e-mail address, phone number and address to be shared with other hunter education instructors in a master instructor directory.

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_

Phone number of Emergency Contact \_\_\_\_\_

Occupation/Former Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Additional Certifications Completed:

[ ] CPR Expiration date: \_\_\_\_\_ [ ] AED Expiration date: \_\_\_\_\_ [ ] EMT Expiration date: \_\_\_\_\_

[ ] First Aid Expiration date: \_\_\_\_\_ [ ] Other \_\_\_\_\_ Expiration date: \_\_\_\_\_

Range Certifications:

[ ] LEO Expiration date: \_\_\_\_\_ [ ] Military Expiration date: \_\_\_\_\_ [ ] NRA Expiration date: \_\_\_\_\_

[ ] National Archery in Schools (NASP) Expiration date: \_\_\_\_\_

[ ] Other: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Certifications Include:

[ ] Range Safety Officer [ ] Chief RSO [ ] General Firearms instructor [ ] Pistol Instructor [ ] Shotgun [ ] Rifle

[ ] Other \_\_\_\_\_



WYOMING GAME AND FISH DEPARTMENT  
Hunter Education Instructor Application

(3.21)



Describe Why you want to be a Hunter ed/ Bowhunter ed Instructor:

Describe what, if any, experience you have with public speaking or teaching:

Describe your experience with hunting, shooting, archery or other related outdoor activities:

Have you ever been a Hunter Ed/Bowhunter ed Instructor in another state? [ ] YES [ ] NO

If yes, please describe: \_\_\_\_\_

Name as you want it to appear on instructor name tag \_\_\_\_\_

If you have a specific instructor you would like to train under, please provide their name and instructor number below

\_\_\_\_\_

**Criminal and/or civil court records shall be reviewed for each applicant for projects where volunteer will be working with youth/families, driving vehicles, handling money or handling firearms:**

I further agree to a complete background check as a component of the certification process **and understand that any inaccurate information on this application may be grounds for disqualification from participating as a volunteer for the Department.**

Have you ever been convicted of a:

- Wyoming wildlife violation { } Yes { } No If yes, please explain \_\_\_\_\_
- DUI { } Yes { } No If yes, please explain \_\_\_\_\_
- Felony { } Yes { } No If yes, please explain \_\_\_\_\_

Are you now currently a defendant in any pending criminal cases? { } Yes { } No If yes, what is the court with jurisdiction in this case? \_\_\_\_\_

Note: This information will be kept confidential. Responding "Yes", to any of the above questions, does not automatically disqualify an individual from volunteering. Department administration shall consider all pertinent aspects of the situation, including the nature and circumstances that required an affirmative response and the nature and scope of the work to be performed by the volunteer.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian signature for authorizing Junior Instructor (age 14-17) \_\_\_\_\_

Date: \_\_\_\_\_