St Lawrence/Ottawa Valley Regional Pony Club CD Examiner Application Form

If you are at least 16 years old and would like to participate in the Canadian Pony Club Examiners Program, please read the sections in the current Canadian Pony Club CD Testing Procedure Requirements for Examiners, Coaches and Candidates regarding Examiners, appointments, duties and responsibilities. Further information may be found in the current Canadian Pony Club CD Testing Procedures document. These documents are found on the Canadian Pony Club webpage under downloads - http://canadianponyclub.org/ You should also read the Examiner FAQs found on the SLOV website. http://www.canadianponyclub.org/SLOV/index.htm

Please complete this form and send it to your Regional Testing Chairperson (address below) or bring it to the next examiners clinic the date and location of which should be on the SLOV website under Testing.

Completing and submitting this form early in the calendar year, (i.e.: January) will help ensure that your name will appear on the new list for the upcoming test season.

Section A:				
Name:	Phone	e: ()		
Date of Birth:	Email:			
Address:				
Postal Code:				
Birth date:(PC members)	or	I am applying as an adult (25 yrs. +) or an		
affiliate.				
Section B: Pony Club Affiliations:				
1. Are you now or were you ever a Pony Club Memb	oer?	What years?		
Region/Branch?	Standard/Level to date:			
If you have not attained full levels, please define which	h test phases yo	u have completed.		
	Date Obtained:			
2. Are you now, or have you in the past, served in an	administrative	capacity in Pony Club?		
Positions held:				
3. Are you now or have you in the past been a Pony of taught stable management or riding lessons, etc? Plantage of the past been a Pony of taught stable management or riding lessons, etc?				

4. Have you attended Pony Club sponsored clinics either for members or for examiners in the past two years? If yes,

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what clinics and who conducted the clinics?		
5. Please list Pony Club activities in which	n you have been involved - dates, levels, a	nd results.
6. Please describe fully your present involvactive competitor status, or any other manne		coaching and/or judging certification,
Section C:		
For those who have <u>no prior Pony club af</u> members;	ffiliation or who are adult "graduated"	(= over 25 years of age) Pony Club
Please fill out Sections A and Section B # 1 - the horse industry and/or Pony Club. Pleas		
Section D: Attachments:		
To this application, please attach the following	ing.	
• a copy of a current St. John A equivalent.	mbulance or Canadian Red Cross Stan	dard First Aid certificate or its
Date: S	Signature:	
Section E:		
I recommend this individual to participate as	s an Examiner for the Pony Club Testing	Program.
Signed by District Commissioner or other Pony	Club committee member:	
Name: (Please Print):	Position:	
Please send this application, attachments and	d your resumé (for adult applicants) to:	Ellen Huckabone 2449 Sixth Line Beckwith R. R. #6, Smiths Falls, ON K7A 4S7