



Application for C*/K Assessment

This application must be lodged with your Zone C*/K Co-ordinator (or Club C*/K Coordinator/ Chief Coach if your zone does not have a Zone C* Coordinator). The Zone C*/K Coordinator is responsible for liaising with the State C*/K Coordinator (coaching@ponyclubwa.asn.au) prior to an assessment date being set.

NOTE: If not enough candidates are ready in your Zone, it may be possible to do it in conjunction with another Zone. The State C*/K Coordinator will be able to advise and coordinate.

C*/K ASSESSMENT FEE

The C*/K Assessment fee will be set by the Zone and paid to Zone. Candidate will need to check what fee will be charged by Zone to cover costs of examination (Examiner/s Fees & Travel costs) Fees may vary between Zones depending on number of candidates and Examiners required. The Zone will advise if payment of an examination fee is required to be sent in with your application or delayed until a later date when specific costs are known, and an appropriate fee can be worked out.

In order to keep costs down for candidates, Zones may look at subsidising fees through fundraising efforts or grants.

CANDIDATE DETAILS

NAME			
ADDRESS			
PHONE		PC ID NUMBER	
EMAIL <i>(Written Paper to be sent to this address)</i>			
CURRENT PONY CLUB			
DATE C CERTIFICATE ACHIEVED			
ZONE			
NAME OF HORSE 1		AGE	
NAME OF HORSE 2		AGE	
SIGNATURE <i>Club Chief Coach</i>			
SIGNATURE <i>Zone C*/K Coordinator</i>			

I understand that the organisers of the assessment can accept no responsibility for damage, loss, or injury to gear or horse or rider, and that I participate at my own risk.

SIGNATURE <i>Candidate</i>		DATE	
SIGNATURE <i>(if rider under 18 yrs) Parent / Guardian</i>		DATE	

COACHES RESPONSIBLE FOR DEEMING CANDIDATES READY FOR ASSESSMENT

Candidates **must be assessed** by suitably qualified people and deemed competent by them (in all areas), prior to applications being forwarded on to the Zone C*/K Coordinator and State C*/K Coordinator.

Signatures are to verify candidate's competence so **MUST** be obtained from the relevant assessors.

AREA OF COMPETENCE	NAME OF HORSE USED (Can use more than one horse)	AGE OF HORSE	CANDIDATE COMPETENT	NAME OF COACH	SIGNATURE & DATE
Rider Tool Kit			Yes / No		
On the Ground			Yes / No		
Under Saddle - Flat			Yes / No		
Under Saddle – Jumping (Not K)			Yes/No		
Lungeing			Yes / No		
Horse Management Horse handling, horse care and general knowledge.			Yes / No		
Alternative Discipline (K only)			Yes / No		
Community Service OR New Skills Component (K only)			Yes / No		
Journal	The candidate's Journal must be checked by the Zone/Club C*/K Co-ordinator or Club Chief Coach prior to being submitted to State C*/K Coordinator for Assessment. Journals must be submitted to the Chief Examiner a minimum of 2 weeks prior to Assessment Date.				
Club Person responsible				<i>Signature</i>	<i>Date</i>

CLUB C*/K COORDINATOR OR COACH CHIEF COACH TO COMPLETE

PONY CLUB COACHES RESPONSIBLE FOR PREPARING CANDIDATES	
NAME OF MAIN COACH (OR COACHES)	SECTIONS OF SYLLABUS COVERED (e.g. Riders Tool Kit, On the Ground, Under saddle, Jumping, Horse Management, Lungeing, K Options etc.)