

PONY CLUB ASSOCIATION OF SOUTH AUSTRALIA INC.
'C'INSTRUCTORS CERTIFICATE NOMINATION

1/1/09

*Fill this form in **BLOCK CAPITALS**.*

NAME:	
ADDRESS:	
TELEPHONE: Home/ Mobile	
Email address	
DATE OF BIRTH:	

CANDIDATE INFORMATION

I understand that I must be a financial member of a club at the time of this application, and also at the time of assessment. I currently hold a current "D" Instructors certificate.

My assessment will be done with 3 examiners. It will consist of a written paper, a flat lesson, a jumping lesson and a games lesson. Each lesson will be approx 20 min long.

Please sign to acknowledge that you have read and understood the information contained on this form.

Signature of candidate	
Date of Nomination:	

NAME OF CLUB:	
Signature of President:	
Name and address of person supervising written papers.	

ZONE APPROVAL

Please ensure that a courtesy copy of this application has been sent to your zone committee.

PCASA APPROVAL

Date nomination received by PCASA	
Date nomination accepted by CIP	