Horse Riding Clubs Association of Victoria Inc. (A0002667H) PO Box 209, NUNAWADING, 3131 PH 9877 0330 FAX: 9877 9400 Email: <a href="mailto:info@hrcav.com.au">info@hrcav.com.au</a> Website: hrcav.com.au

## **EXPRESSION OF INTEREST**HRCAV Technical Delegate

Members seeking accreditation as an HRCAV Official must register their interest by forwarding a completed form and any other relevant details to the HRCAV. Upon consideration of details provided, successful applicants shall be registered as a new candidate and be invited to commence the accreditation process. An overview of the accreditation process can be found in the relevant section of the HRCAV Manual and forthcoming training and examination day(s) are advertised in the HRCAV newsletter. Note: Applicants must be at least 18 years of age.

NAME:			MEMBERS	HIP#:		DATE:				
ADDRESS:						POSTCODE:				
EMAIL:		PHONE NO:								
SIGNATURE:				CLUB:						
WORKING WITH CHILDREN CHECK										
DO YOU HAVE A CU	JRRENT WWCC?	ARE YOU EXEMPT FROM THE			REASON FOR EXEMPTION					
YES	NO		WWCC REQI							
WWCC CARD HOLDERS – A	TTACH COPY OF CARD.									
ALL OFFICIALS MUST HAVE A	WWCC UNLESS EXEMPT		YES	NO		STERED TEACHERS & POLICEOFFICERS ASE RECORD RELEVANT ID NUMBER.				

## **SELECT THE APPROPRIATE ANSWERS**

RIDING EXPERIENCE																
CURRENT HRCAV LEVEL AND HOW LONG AT THIS LEVEL																
	LEVEL	HOW LONG?	LEVE	HOW LONG?	LEVEL	HOW LONG?	LEVE	EL	HOW LONG?	LEVEL	HOW LONG?					
Dressage	5		4		3		2			1/ Adv		Not assessed				
Showjumping	5		4		3		2			1/ Adv		Not assessed				
Horse Trials	5		4		3		2			1		Not assessed				
HIGHEST EVER HRCAV ASSESSED LEVEL																
DRESSAGE SHOW JU			V JUMI	IPING HORSE TRIALS			SHOWING			VING	3 PHASE EQUITATION					
HIGHEST EVER NON HRCAV LEVEL				DISCIPLINE:								LEVEL:				
HIGHEST EVER NON HRCAV LEVEL			ı	DISCIPLINE:								LEVEL:				
OTHER RELEVANT EXPERIENCE	RIDIN	NG														

TRAINING AND IN THE FIELD EXPERIENCE															
Please tick						1	2		3	4 or m	ore	None			
Number of HRCAV Training															
Number of Non-HRCAV Trai	ning Cli	nics .	Attended												
Type of Training Clinic/s att	tended:					When attended									
HORSE TRIALS (please tick)															
Jump Judge	< 5 times			< 20 times		< 40 times		> 40		Never					
Level/Grade	Lvl/Gr 5			Lvl/Gr 4		L3/Gr 3			L2/Gr 2		L1/Gr 1				
COACHING EXPERIENCE															
Have You Ever Coached YES					NO	)									
Type Of Coaching															
Qualifications															
Coaching Experience	Under 1 yr 1-2 Yrs					3-4 Yrs		4-5Yı	írs C			5 Yrs			
QUALIFICATIONS															
Do you have relevant formal qualifications with other															
organisations eg. EA? Please state type of qualification and date															
obtained		_													
OTHER EXPERIENCE															
Other relevant experience/qualifications (tick)  CROSS COUNTRY COURSE ACCREDITOR				Y	SJ COU				OTHER Specify:						
Recent relevant appointments – including date, location & event															
Discipline Specific Referee (not compulsory															
Motivation for seeking accreditation															

Applicants who can show proof of qualifications and/or extensive experience in their area of interest may be eligible for training concessions at the discretion of the relevant Sub Committee. Please attach proof of relevant qualifications where applicable. The original of this form will be kept at the HRCAV office and a copy sent to the relevant Sub-Committee.