

## OFFICIALS PROGRAM SHADOW JUDGE REPORT

### FORM 1

Use one form for each competition. Photocopy this form for additional competitions. This form is to be used by all applicants to register their experience of officiating at competitions. Please ensure this form is filled in accurately and legibly.

Candidates Name:			EC #:			
Name	of Competition:	Date:				
Locati	on: Class of show: Gold:	_ Silver:	_ Other:			
How n	nany days did you attend the competition as a judge?					
•	As a "shadow (recording) judge"? If yes, go to question 1.	Y	es No			
•	As a "sole judge"? If yes, go to question 2.	Y	es No			
•	I did both! If yes, fill out all areas below outlining your participation.	Y	es No			
Note:	Remember to enclose sample judges' cards for all divisions signed by se	enior judge.				
1- CL	ASSES JUDGED AS SHADOW JUDGE					
1.1	Jumping Jumping divisions judged: (List) How many classes? How many days? With whom did you shadow judge? Did you act as a timer? Yes or No If yes, how many classes? Did you use a stop watch? Yes or No Did you use electronic time					
1.2	Hunter divisions judged: (list) How many days? Other Hunter Divisions: How many days? How many classes? How many days? Any specialty classes to be noted (eg. Classic): With whom did you shadow judge?					
1.3	Hack Hack Classifications (Check those applicable): Road Hack English How many classes? How many days? With whom did you shadow judge?					
1.4	Equitation  Equitation Classifications (Check those applicable): Hunt Seat Wes How many classes? How many days? Any specialty classes to be noted (eg. Medal classes): With whom did you shadow judge?		•			



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1.5	Western Western Classifications (Check those applicable): Western Pleasure Trail Western Riding					
	Reining Showmanship	_ ITan Western Kluing				
	How many classes? How many days?					
	With whom did you shadow judge?					
1.6	Ducada					
1.0	Breeds How many classes? How many days?					
	110 w many classes110 w many days					
Senior	Judge Name (print):	EC #:				
2411101	(					
Senior	Judge Signature:	Date:				
		Butc				
2 – CL	ASSES JUDGED AS SOLE JUDGE					
2.1	Jumping classes judged? (List):					
2.2	Hunter classes judged? (List):					
2.3	Hack classes judged? (List):					
2.4	Equitation classes judged? (List):					
2.5	Western classes judged? (List):					
2.6	Breed classes judged? (List):					
How m	any days? Steward(s) name:					
Any co	mments regarding the competition?					
Show Manager Name (print):		Phone #:				
Show N	Manager Signature:	Date:				
Note: C	Copy this completed form. Send the original with your application. Keep	p a copy for your files.				



### **OFFICIALS PROGRAM SHADOW JUDGE REPORT**

#### FORM 2

The person named below has applied to the EC for enrollment or promotion as a recognized judge. To clarify his/her qualifications, EC requests your assistance in completing this confidential questionnaire. We request you as the attending senior judge complete, sign and return this questionnaire promptly in the enclosed paid postage envelope supplied by the applicant. It is very important you include factual and other comments on which you base your response. The committee can then accurately access the candidate's qualifications.

Candidates Name: is applying for:  Recorded or Senior judges status in (Check those applicable): Jumping Hunter Hack  Equitation General Performance Western										
Please evaluate the above named applicant										
on the following applicable criteria:		Good	Average	Fair	Poor	N/A				
Proper judicial temperament to officiate										
Knowledge of general rules of EC and division(s) applied for										
Ability to judge performance										
Ability to judge soundness										
Ability to judge equitation										
Ability to judge under saddle division(s)										
Impartiality in rendering decisions										
Understanding the responsibility to the EC										
Book keeping										
I judged at Hors the division(s) of for (# of days)_	orse Show on (date)									
the division(s) of for (# of days)_		with the above mentioned applicant.								
Comments:										
Comments.										
The undersigned understands that the information contained in this reference is submitted on a confidential basis and EC shall endeavor to keep the undersigned identity confidential.  Name: EC #										
Equestrian Canada										

Officials Program

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