BRITISH CONNEMARA PONY SOCIETY

www.britishconnemaras.co.uk



Registered Charity No: 262765

Company No. 1006107

Executive Secretary Mrs Geth Tillin 24 Mount Pleasant Road Alton Hampshire GU34 1NN

Telephone: 0845 604 9690

BCPS COLT INSPECTORS APPLICATION FORM

| Your Details: | |
|--|---|
| TitleSurname | Membership no |
| Address (CAPITALS PLEASE) | |
| | |
| Post Code Tel Emai | il |
| Date of birth(Applications must be 25 years or | over on 1st January in the year they apply) |
| Are you currently on the BCPS Filly Inspectors Panel | YES/NO |
| How any Filly Inspections have you officiated at | |
| Have you acted as a Steward at a BCPS Colt Inspection | YES/NO |
| Nominated by the following two BCPS Members: | |
| 1) Proposer | Membership no |
| 2) Seconder | Membership no |
| Please complete the following questions - | |
| Do you breed horses/ponies? If so please state which breed and how many foals have you bred? Do you stand a stallion at stud etc? | long you have been breeding them (E.G How |
| | |
| | |
| Are you familiar with the inspection procedures of any other bree | ed of horse or pony? |
| | |
| | |

| Have you had Connemara ponies inspected? | |
|--|---------------------------------------|
| List your experience in the judging of horses/ponies - | |
| Have you seen Connemara ponies in any other country? | YES/NO |
| Have you been to Clifden Show? | YES/NO |
| Have you attended Colt Inspections organised by any other CPS? | YES/NO |
| Do you have nationally recognised equine credentials? If so please give | details – |
| | |
| Do you enjoy working with others? | YES/NO |
| How do you view the role of a Colt Inspector? | |
| | |
| Why do you want to be a Colt Inspector ? | |
| | |
| Please give any further information that you feel might be helpful to yo | ur application on this page. |
| | |
| I have been a BCPS Member for the previous four years | |
| Signature of Application | |
| Notes: please complete the above form and insert your name into the two qu | uestionnaires below and then send the |

form together with a copy of your CV to your Proposer and Seconder (both need to be colt inspectors or judges). Please provide them with an SAE so that the final completed form, CV and Questionnaires can be sent to the BCPS Office.

Applications will not be considered by the Probationer Judges Committee unless both the questionnaires and the application form and CV are all submitted.

BCPS COLT INSPECTORS SCHEME PROPOSER'S QUESTIONNAIRE

| Your Details: | |
|---|---------|
| TitleSurnameMembership no | |
| Address (CAPITALS PLEASE) | |
| | • • • • |
| Post CodeTelEmail. | |
| | |
| Name of Candidate | |
| | ••• |
| | ••• |
| | |
| | |
| | |
| I have been a BCPS Member for the previous four years | |
| SignedDate | |
| | |
| | |
| | |
| BCPS COLT INSPECTORS SCHEME SECONDER'S QUESTIONNAIRE | |
| BCPS COLT INSPECTORS SCHEME SECONDER'S QUESTIONNAIRE Your Details: | |
| | |
| Your Details: | |
| Your Details: TitleSurnameMembership no | ••• |
| Your Details: TitleSurnameMembership no Address (CAPITALS PLEASE) | ••• |
| Your Details: TitleSurnameMembership no Address (CAPITALS PLEASE) | ••• |
| Your Details: TitleSurnameMembership no Address (CAPITALS PLEASE) | ••• |
| Your Details: TitleInitialsSurnameMembership no Address (CAPITALS PLEASE) | |
| Your Details: Title | |
| Your Details: TitleInitialsSurnameMembership no Address (CAPITALS PLEASE) | |
| Your Details: Title | |
| Your Details: Title | |
| Your Details: TitleInitialsSurnameMembership no Address (CAPITALS PLEASE) | |