



FINAL RESULTS SHEET SILVER LEVEL ACCREDITATION

ASSESSMENT SIGN-OFF SHEET

CANDIDATES NAME: _____

EMAIL ADDRESS: _____

ASSESSMENT LOCATION: _____ DATE OF ASSESSMENT: _____

YOUR ZONE: _____ ZONE WHERE ASSESSED: _____

ASSESSOR PLEASE TICK	DEMONSTRATED COMPETENCY	NOT YET COMPETENT
Flatwork		
Dressage		
Jumping		
Cross Country		
Jumping Equitation		
Show Riding		
Pairs/Teams of Four/Troop Drill		
Mounted Games		
Polocrosse		
Camp draft		
Tetrathlon		
Lungeing		

Silver Level Coach Workbook Completed.

Silver Horsemanship Online Assessment Completed.

ASSESSOR: _____

ASSESSOR: _____

This page to be handed in at the assessment or forwarded to coach@pcansw.org.au