

Email:

EA DRESSAGE JUDGE APPLICATION FORM & PRE REQUISITES REQUIRED TO FAST TRACK TO D LEVEL



(To be completed by the upgrading judge)					
Assessment Slip	Date/Location			Name - JE/Mentor/SDA	Signature
Attend an seminar that includes D Level	Date: Location:				
Complete the current ORBT	Date:				
with at least 90%	Percentage:				
Medium Theory Exam	Date:				
Completed with 80% Pass Mark	Percentage:				
Complete Generic Units (Compulsory) Note: Units 1, 4 & 5 will be covered in your E level seminar Units 2 and 3 may be done online	Unit 1 – EA/NOAS				
	Unit 2 – Conflict Resolution https://learning.ausport.gov.au/jportal/default.aspx				
	Unit 3 – Safety & Risk Management https://learning.ausport.gov.au/jportal/default.aspx				
	Unit 4 – Ethical Issues				
	Unit 5 – Horse Welfare				
Sit in on 2 separate occasions at Medium level with a different Judge Educator	1.				
Sit in assessment forms completed/attached	2.				
Assessment Slip	Date/ Locatio	n	JE/Mentor/SDA/Name	JE Signature	
Assessment slips go directly to the State Dressage Authority for verification with this summary sheet. Results are forwarded by the SDA to the National Office.					
Shadow Judge 1 entire	Competition	Date	No of		
Medium competition with at least 25 horses OR Shadow Judge 2 entire Medium competitions where the total number of horses overall is 30 or more	e.g. 3.3		Horses		
	1.				
	2				
	2.				
(Supervising judge must be					
an appointed Judge					
Educator)					
All Shadow judging evaluation forms submitted	Yes No No				
evaluation forms submitted					
Practical Assessment/ Exam Completed	Competent				
	Not Competent				
	Date:				
SDA — Please return a copy of this form only to the EA Education Department					
Officials Education Coordinator EA National Office					
PO Box 673, SYDNEY MARKETS, NSW 2129 OR Fax: 02 9763 2466 OR Email (preferred):info@equestrian.org.au					
NOTE: Applications that <u>do not include a completed table</u> will not be accepted					
Please provide the following details:					
Current EA Member Numbe	r:				
Name: Date of Birth:					
Address:					
Suburb:			State	: Post Cod	le:
Tel:	Mobile:				
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