



# INSTRUCTORS' CERTIFICATION PROGRAM CANDIDATE APPLICATION FORM



Application form, student verification forms, recommendation form, and ICP registration application fee of \$75 (includes the ICP Workbook and ICP Standards Booklet), payable to USEA, should be returned to:

Nancy Knight, USEA Inc., 525 Old Waterford Road, NW, Leesburg, VA 20176.

**PLEASE COMPLETE IN BLOCK CAPITALS USING BLACK INK. THANK YOU.**

**NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **USEA MEMBER #:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ (DAY)  
\_\_\_\_\_ (EVENING)  
\_\_\_\_\_ (MOBILE) **EMAIL ADDRESS:** \_\_\_\_\_

**DOB:** \_\_\_\_\_ **HIGHEST LEVEL OF ACADEMIC EDUCATION COMPLETED:** \_\_\_\_\_

**FORMAL HORSE-RELATED EDUCATION** (Pony Club rating, BHS exposure, ARICP, equestrian studies college major, etc. Not clinics)

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**COMMENTS ON ABOVE EDUCATION**

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**DEFINITIONS OF ICP INSTRUCTOR LEVELS (FOR BOTH REGULAR AND PROVISIONAL ICP CERTIFICATION):**

- LEVEL I-NOVICE:** Instructors of riders through Novice level riding/training/competing and horse care
- LEVEL I-TRAINING:** Instructors of riders through Training level riding/training/competing and horse care
- LEVEL II:** Instructors of riders through Preliminary, CIC\*, Training Level Three-Day, CCI\*riding/training/competing and horse care
- LEVEL III:** Instructors of riders through Intermediate, CIC\*\*, CCI\*\* riding/training/competing and horse care
- LEVEL IV:** Instructors of riders through Advanced, CIC\*\*\*, CCI\*\*\* riding/training/competing and horse care

**DATE OF NATIONWIDE CRIMINAL BACKGROUND CHECK:** \_\_\_\_\_ (You must provide a copy to receive your ICP certificate and benefits.)

**DATE OF FIRST AID/CPR TRAINING:** \_\_\_\_\_ (You must provide a copy to receive your ICP certificate and benefits.)

**DATES/PLACES OF USEA OR EVENT COMPETITION-RELATED VOLUNTEER WORK, 10 HOURS/YEAR**

(Please record here, or present at time of assessment.)

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**UPON ENTRY INTO ICP AS A CANDIDATE INSTRUCTOR, YOU SHOULD SUPPLY AS MUCH OF THE FOLLOWING INFORMATION AS CURRENTLY EXISTS. YOU MAY SUPPLY REMAINING INFORMATION AT THE TIME OF YOUR ASSESSMENT.**

**I. TEACHING**

**A. I am teaching and/or have taught at least 3 students while they are/were competently competing at the highest level of my intended certification.**

With this application, I am enclosing their USEA (or USCTA) competition record, readily obtainable from the Competition Manager of the USEA. Their names and, city/state are recorded below. In addition, I have provided a brief explanation of both high and low points of their careers-to-date. The Student Verification Forms, with student signatures will be either included with this form or mailed separately by students to the USEA office.

**NAME:** \_\_\_\_\_ **CITY/STATE:** \_\_\_\_\_  
**#1** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**NAME:** \_\_\_\_\_ **CITY/STATE:** \_\_\_\_\_  
**#2** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**NAME:** \_\_\_\_\_ **CITY/STATE:** \_\_\_\_\_  
**#3** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**B. I have had significant exposure to the teaching of the following 3 horsemen and/or horsewomen, at least 2 of whom are event instructors, with one of the latter having signed the attached sheet indicating his or her support of my status as a USEA Instructors' Certification Program candidate instructor at the Level I indicated above.**

**#1 NAME:** \_\_\_\_\_  
**KIND, DATES, AND AMOUNTS OF EXPOSURE** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**#2 NAME:** \_\_\_\_\_  
**KIND, DATES, AND AMOUNTS OF EXPOSURE** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**#3 NAME:** \_\_\_\_\_  
**KIND, DATES, AND AMOUNTS OF EXPOSURE** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**II. RIDING**

**A. I have completed the following event(s) on the horse(s) listed and at the locations and dates listed (selected events at highest level only).**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

AND/OR

**B. I have competed in the following hunter/jumper classes, dressage shows, point-to-point race meets, fox hunts, or any other horse sport on the horse(s) listed and at the locations and dates listed (most significant only).**

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**III. HORSEMANSHIP**

**A. I have been responsible for the feeding, care, and conditioning of the following 3 horses** of my own and/or others when in normal use and/or in preparation for, during, and in aftermath of competition. Horses' names and most demanding riding use are provided below

**HORSE #1:** \_\_\_\_\_

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**HORSE #2:** \_\_\_\_\_

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**HORSE #3:** \_\_\_\_\_

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**B. I have an at least rudimentary understanding of lamenesses and illnesses and some experience with intervention.** I am able to identify abnormal versus normal findings in a horse's limbs, body, and internal systems. **Two instances of intervention which I managed** are recounted below.

**INCIDENT #1:** \_\_\_\_\_

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**INCIDENT #2:** \_\_\_\_\_

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\_\_\_\_\_  
**SIGNATURE OF CANDIDATE INSTRUCTOR**

\_\_\_\_\_  
**NAME**

**On the back of this sheet, supply additional information that you would like to share with the ICP Committee, if you so desire.**



# INSTRUCTORS' CERTIFICATION PROGRAM

## CANDIDATE INSTRUCTOR RECOMMENDATION FORM



**TO BE COMPLETED BY CANDIDATE INSTRUCTOR:**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_

PHONE: \_\_\_\_\_ (DAY)  
 \_\_\_\_\_ (EVENING)  
 \_\_\_\_\_ (MOBILE)

**CERTIFICATION LEVEL SOUGHT BY CANDIDATE:**

- LEVEL I-NOVICE** – students at Novice and below
- LEVEL I-TRAINING** – students at Training and below
- LEVEL II** – students at Preliminary, Training Level 3-Day Event, CIC\*, CCI\* and below
- LEVEL III** – students at Intermediate, CIC\*\*, CCI\*\* and below
- LEVEL IV** – students at Advanced, CIC\*\*\*, CCI\*\*\* and below

**TO BE COMPLETED BY EXPERIENCED HORSEMAN / WOMAN:**

As an experienced horseman or horsewoman, knowledgeable about the sport of eventing and about the skills and experience of the above-named individual, I support \_\_\_\_\_, who is a candidate in the USEA's Instructors' Certification Program at Level \_\_\_\_\_.

SIGNED: \_\_\_\_\_  
 (Signature of horseman or horsewoman)

\_\_\_\_\_  
 (Printed name)

\_\_\_\_\_  
 (Address)

\_\_\_\_\_  
 (City, State, Zip Code)

\_\_\_\_\_  
 (Telephone, Email)

\_\_\_\_\_  
 (Date)