



USEA INSTRUCTORS' CERTIFICATION PROGRAM CROSS-COUNTRY CONTINUING EDUCATION ACTIVITY VERIFICATION

Return this completed and signed sheet for your cross-country mentoring to:
Nancy Knight, USEA Office, 525 Old Waterford Rd. NW, Leesburg, VA 20176,
e-mail to Nancy@useventing.com, or fax to Nancy at 703 779-0550.

Instructor Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone(s) _____ E-mail: _____

Date of cross-country continuing education: _____

Location: _____

Cross-Country Continuing Education:

- Exceeds Certification Requirements
- Meets Certification Requirements
- Needs More Practice *

Comments:

*If 'Needs More Practice' box is checked, please include comments/suggestions for instructor to meet or exceed certification requirements, i.e. additional mentoring, attendance at an ICP Workshop for the x-c phase, etc.

Observing ICP Instructor Sign-Off: _____ (signature)

_____ (printed name)

Observing ICP Instructor ICP Certification Level: _____