



PATH

INTERNATIONAL

Professional Association of Therapeutic
Horsemanship International

*Ensuring excellence and changing lives
through equine-assisted activities and therapies*

**PATH Intl. Equine Specialist in
Mental Health and Learning Workshop
And Horsemanship Skills Test**

Final Forms Packet

PATH Intl. Equine Specialist in Mental Health and Learning Workshop and/or Practical Skills Test Host Site Final Forms Packet

Enclosed please find the remaining materials for you to successfully host a PATH Intl. Equine Specialist in Mental Health and Learning Workshop and or Horsemanship Skills Test.

The following is the list forms within this packet and the number of copies you will need to have ready for the faculty/evaluators when they meet with you on the day before the workshop begins.

- Checklist for Evaluators (1)
- PATH Intl. Site Evaluation form for participants to fill out (1 per candidate) * - *Returned to PATH Intl. office*
- Faculty/Evaluator feedback form for participants to fill out (1 per candidate) * - *Returned to PATH Intl. office*
- Faculty/Evaluator feedback form for host site to fill out (1) *- *Returned to PATH Intl. office*
- Host Site evaluation form for faculty to fill out (1) - *Returned to PATH Intl. office*
- Upgrade form for faculty to fill out (1) - *Returned to PATH Intl. office*
- Candidate Report Form (1) Center staff should fill in student names and PATH membership numbers and have this ready on the last day of the workshop. - *Returned to PATH Intl. office*
- Roll Call Sheet (1) Center staff should fill in student names.
- Horsemanship Skills Test Candidate Testing Schedule (You may go ahead and assign times according to student travel needs. Please start at 8:00 am and fill in each slot as needed, leaving extra slots at the end of the day)
- Candidate Cover Sheet (1 per candidate) *- *Returned to PATH Intl. office*
- Skills Test Candidate Report (2 per candidate, single sided, Please DO NOT staple) *- *Returned to PATH Intl. office*
- Final Accounting Statement- *Returned to PATH Intl. office*

***Forms need to be copied and/or filled in by the host site as needed for each participant in the workshop and or skills test according to above list and should be available for faculty on the day prior to the beginning of the workshop.**

PLEASE CALL THE PATH Intl. OFFICE IF THE MANUALS HAVE NOT ARRIVED WITHIN TWO DAYS OF YOUR WORKSHOP.

Please contact your Lead Faculty/Evaluator if you have any questions regarding any of the enclosed materials. Best of luck with your workshop and/or skills test, we hope you and your participants/candidates enjoy the experience!

Thank you again on behalf of PATH Intl.!



PATH Intl. Equine Specialist in Mental Health and Learning Workshop and Skills Test

Checklist for Evaluators

Please return the following items at the conclusion of each ESMHL workshop and skills test. All items should be sent no later than 10 business days following the event.

- Roll Call Sheet
- Candidate Report Form
- Certification On-Site Summary sheet
 - Filled out, one per candidate
- Scoring Guidelines with Score Sheet definitions (Horsemanship Skills Test rubric/score sheet)
 - Filled out, one per candidate
- Upgrade Recommendation Form
 - If an apprentice teaches the workshop with you OR if an associate would like to move to a lead
- Host Site Evaluation Form
- Faculty/Evaluator feedback form
 - Both the one the host site fills out and the participants fill out
- Final Accounting Statement (sent by the host site)

I verify that all these items are organized and neatly put together to be sent back to the PATH Intl. office by _____ (name of person or center sending them).

Evaluator Signature: _____ Date: _____

Equine Specialist in Mental Health and Learning Workshop

SKILLS FOR WORKING WITH MENTAL HEALTH AND EDUCATION PROFESSIONALS AND THEIR CLIENTS

Faculty/Evaluator Feedback Form *(For Participants to complete)*

Please return all completed Faculty/Staff Feedback forms to the PATH Intl. Office with the other evaluation forms.

Name of Host Site _____ Date of Evaluation _____

Faculty/Staff 1 _____

Faculty/Staff 2 _____

Faculty/Staff 3 _____

Please rate each faculty/staff in each category below, using the following scale:
5=excellent 4=good 3=satisfactory 2=poor 1=unsatisfactory

	Faculty 1	Faculty 2	Faculty 3
Faculty members discussed the schedule for the workshop with sufficient details.			
Faculty members conducted the workshop in a manner which promoted a learning atmosphere.			
Faculty clearly explained the workshop schedule and process to the participants.			
Faculty conducted the workshop in a professional manner.			
Faculty were accommodating to questions and/or concerns of the participants			
Faculty were good ambassadors of PATH Intl.			
Faculty promoted an environment which allowed for a successful workshop.			
Faculty should be asked to be the faculty for another workshop.	Yes No	Yes No	Yes No

Please comment on all statements rated 3 and below. Please add any other comments about your experience at this workshop. Specific information would be helpful for the review.

PATH Intl.

Equine Specialist in Mental Health and Learning Workshop

SKILLS FOR WORKING WITH MENTAL HEALTH AND EDUCATION PROFESSIONALS AND THEIR CLIENTS

PATH Intl. & SITE EVALUATION FORM *(For Participants to complete)*

Name of Host Site _____ Date of Evaluation _____

Faculty/Staff _____

This evaluation form is to be completed by the Faculty & Participants at the completion of the Workshop.

Please return the complete Site Evaluation to the PATH Intl. Office with the other evaluation forms.

Please rate the following:

- | | | | | |
|--|------|------|------|-----------|
| 1. Workshop Participant Registration Process | Poor | Fair | Good | Excellent |
| 2. Host Site Classroom Facilities | Poor | Fair | Good | Excellent |
| 3. Host Site Convenience to the airport/ train | Poor | Fair | Good | Excellent |
| 4. Ease in finding the Host Site | Poor | Fair | Good | Excellent |
| 5. Convenience to lodging and restaurants from Site | Poor | Fair | Good | Excellent |
| 6. Host Site met the physical needs of the Faculty and Participants | Poor | Fair | Good | Excellent |
| 7. Available tack and equipment met the needs of the workshop | Poor | Fair | Good | Excellent |
| 8. Host Site provided sufficient staffing and assistance | Poor | Fair | Good | Excellent |
| 9. The environment at the Host Site allowed for a successful Workshop | Poor | Fair | Good | Excellent |
| 10. Please provide comments for any item scoring less than Good or any other additional comments about your experience at this site. | | | | |

Thank you for participating in the Workshop!

Equine Specialist in Mental Health and Learning Workshop

SKILLS FOR WORKING WITH MENTAL HEALTH AND EDUCATION PROFESSIONALS AND THEIR CLIENTS

Faculty/Evaluator Feedback Form (For Host Site to complete)

Please return all completed Faculty/Staff Feedback forms to the PATH Intl. Office with the other evaluation forms.

Name of Host Site Representative _____

Name of Host Site _____ Date of Evaluation _____

Faculty/Staff 1 _____

Faculty/Staff 2 _____

Faculty/Staff 3 _____

Please rate each faculty/staff in each category below, using the following scale:

5=excellent 4=good 3=satisfactory 2=poor 1=unsatisfactory

	Faculty 1	Faculty 2	Faculty 3
Faculty corresponded sufficiently with the host site prior to the workshop.			
Faculty clearly delineated staffing and volunteer needs for the workshop.			
Faculty clearly delineated tack and equipment needs for the workshop.			
Faculty clearly communicated horse requirements prior to the workshop.			
Faculty members indicated the audio visual equipment needs for the workshop.			
Faculty members discussed the schedule for the workshop with sufficient details.			
Faculty members conducted the workshop in a manner which promoted a learning atmosphere.			
Faculty clearly explained the workshop schedule and process to the center/participants.			
Faculty members were responsible and left the facility in the same state as it was when they first arrived.			
Faculty worked with the center to handle issues which were a concern to either the center or PATH Intl. representatives			
Faculty were good ambassadors of PATH Intl.			
Faculty promoted an environment which allowed for a successful workshop.			
Faculty should be asked back for another workshop at another host site or at this host site.	Yes No	Yes No	Yes No

Please add additional comments on the back of this form. Thank you!

PATH Intl. Center Representative Signature _____ Date _____

Equine Specialist in Mental Health and Learning Workshop

SKILLS FOR WORKING WITH MENTAL HEALTH AND EDUCATION PROFESSIONALS AND THEIR CLIENTS

Host Site Evaluation Form *(For Faculty to complete)*

Please return all completed Evaluation forms to the PATH Intl. Office with the other evaluation forms.

Name of Host Site _____ Date of Evaluation _____

Faculty/Evaluators _____

This evaluation form is to be completed by the Faculty/Evaluators following the completion of the Workshop. *Please mail the completed Site Evaluation to the PATH Intl. Office with the other workshop materials.*

Rate the Host Site in the following areas:

1. Workshop / Evaluation Participant Registration Process	Poor	Fair	Good	Excellent
2. Classroom Facilities	Poor	Fair	Good	Excellent
3. Convenience to the airport/ train	Poor	Fair	Good	Excellent
4. Ease in finding the facility	Poor	Fair	Good	Excellent
5. Convenience to lodging and restaurants	Poor	Fair	Good	Excellent
6. Meeting the physical needs of the Faculty and Participants	Poor	Fair	Good	Excellent
7. Available tack and equipment met the needs of the workshop	Poor	Fair	Good	Excellent
8. Horses met the needs of the workshop and participants	Poor	Fair	Good	Excellent
9. Horses were actively engaged and Responsive during role plays	Poor	Fair	Good	Excellent
10. Host Site provided sufficient staffing and assistance	Poor	Fair	Good	Excellent
11. The environment at the Host Site allowed for a successful Workshop	Poor	Fair	Good	Excellent
12. Host site provided adequate meals and and snacks throughout the workshop	Poor	Fair	Good	Excellent

Please provide comments for any item scoring less than Good or any other items you would like to comment on.

Feel free to use the back of this page, thank you!

PATH Intl.

Equine Specialist in Mental Health and Learning Workshop

SKILLS FOR WORKING WITH MENTAL HEALTH AND EDUCATION PROFESSIONALS AND THEIR CLIENTS

Recommendation for Upgrade Form – Faculty/Evaluator (for faculty to complete)

Please return all completed recommendation forms with the corresponding performance evaluation rubrics to PATH Intl. The faculty/evaluator candidate is expected to provide a copy of the performance evaluation.

Apprentice Name _____ Evaluating Faculty Name _____

Evaluation Location & Date _____

Recommendations (circle Apprentice or Associate AND Associate or Lead as appropriate):

- Apprentice / Associate has completed one workshop and Skills Tests and is recommended for upgrade to Associate / Lead Faculty/Evaluator after completing another one.
- Apprentice / Associate has completed (#) _____ workshops and Skills Tests and should become an Associate / Lead Faculty/Evaluator upon PATH Intl. verification of requirements have been satisfied.
- Apprentice / Associate has completed (#) _____ workshops and Skills Tests and is not ready to become an Associate / Lead Faculty/Evaluator. Explanation below.

Reasons for above Recommendation:

Lessons/topics and exercises assigned for this apprenticeship:

Lessons/topics and exercises to practice for next apprenticeship:

I, (Apprentice/Associate) _____, have read and discussed my evaluation and this recommendation with the workshop Faculty/Evaluator.

Signature of Faculty/Evaluator: _____ Date: _____

Signature of Apprentice/Associate: _____ Date: _____

PATH Intl. Instructor Workshop and/or On-Site Registered Certification Candidate Report Form

Name of Host Site: _____

Dates of Workshop and/or Certification: _____

Faculty/Evaluators: _____

Please list **all** Candidates who attended both or either portion of the Workshop and/or Skills Test

	Participant/Candidate Name	PATH Intl. ID#	Workshop	Skills Test Completed	Met Criteria	Withdrew From
1			Yes / No	Yes / No	Yes / No	Workshop Cert
2			Yes / No	Yes / No	Yes / No	Workshop Cert
3			Yes / No	Yes / No	Yes / No	Workshop Cert
4			Yes / No	Yes / No	Yes / No	Workshop Cert
5			Yes / No	Yes / No	Yes / No	Workshop Cert
6			Yes / No	Yes / No	Yes / No	Workshop Cert
7			Yes / No	Yes / No	Yes / No	Workshop Cert
8			Yes / No	Yes / No	Yes / No	Workshop Cert
9			Yes / No	Yes / No	Yes / No	Workshop Cert
10			Yes / No	Yes / No	Yes / No	Workshop Cert
11			Yes / No	Yes / No	Yes / No	Workshop Cert
12			Yes / No	Yes / No	Yes / No	Workshop Cert
13			Yes / No	Yes / No	Yes / No	Workshop Cert
14			Yes / No	Yes / No	Yes / No	Workshop Cert
15			Yes / No	Yes / No	Yes / No	Workshop Cert
16			Yes / No	Yes / No	Yes / No	Workshop Cert
17			Yes / No	Yes / No	Yes / No	Workshop Cert
18			Yes / No	Yes / No	Yes / No	Workshop Cert
19			Yes / No	Yes / No	Yes / No	Workshop Cert
20			Yes / No	Yes / No	Yes / No	Workshop Cert



PATH Intl. Equine Specialist in Mental Health and Learning

Skills Test Scheduling and Support:

Host Site Liaison: Please count the number of skills test applicants and fill each time slot from the top, so that there are no time gaps in the schedule. The scheduled time for each applicant is to be determined by the host site liaison so that those who travel long distances or need to make flight arrangements may be allowed to test early in the day at the discretion of the liaison. When applicants are notified of their schedule, they should be told to **allow up to one hour from their scheduled testing time**. Occasionally times slip due to horse and/or grading issues. **Applicants will meet with evaluators for results immediately after testing and are free to leave as soon as a staff member has provided the candidate with a copy of their Candidate Cover Sheet.**

Equine needs: The Host Site will need to provide 4-5 equines in the morning and 4-5 equines in the afternoon. Unless the equines are used to being in the stall all day, they tend to get tired of standing around before the end of the testing so it is good to rotate at the lunch break so some work in the morning and others in the afternoon. No horse should be used for the test more than three times during the day.

The Host Site will need to provide a **private room with a table or desk and 3 chairs for grading and meeting with applicants after testing. This room should be close to the horse stalls and/or ring where testing will take place.** This may be a tack room, volunteer room, office etc.

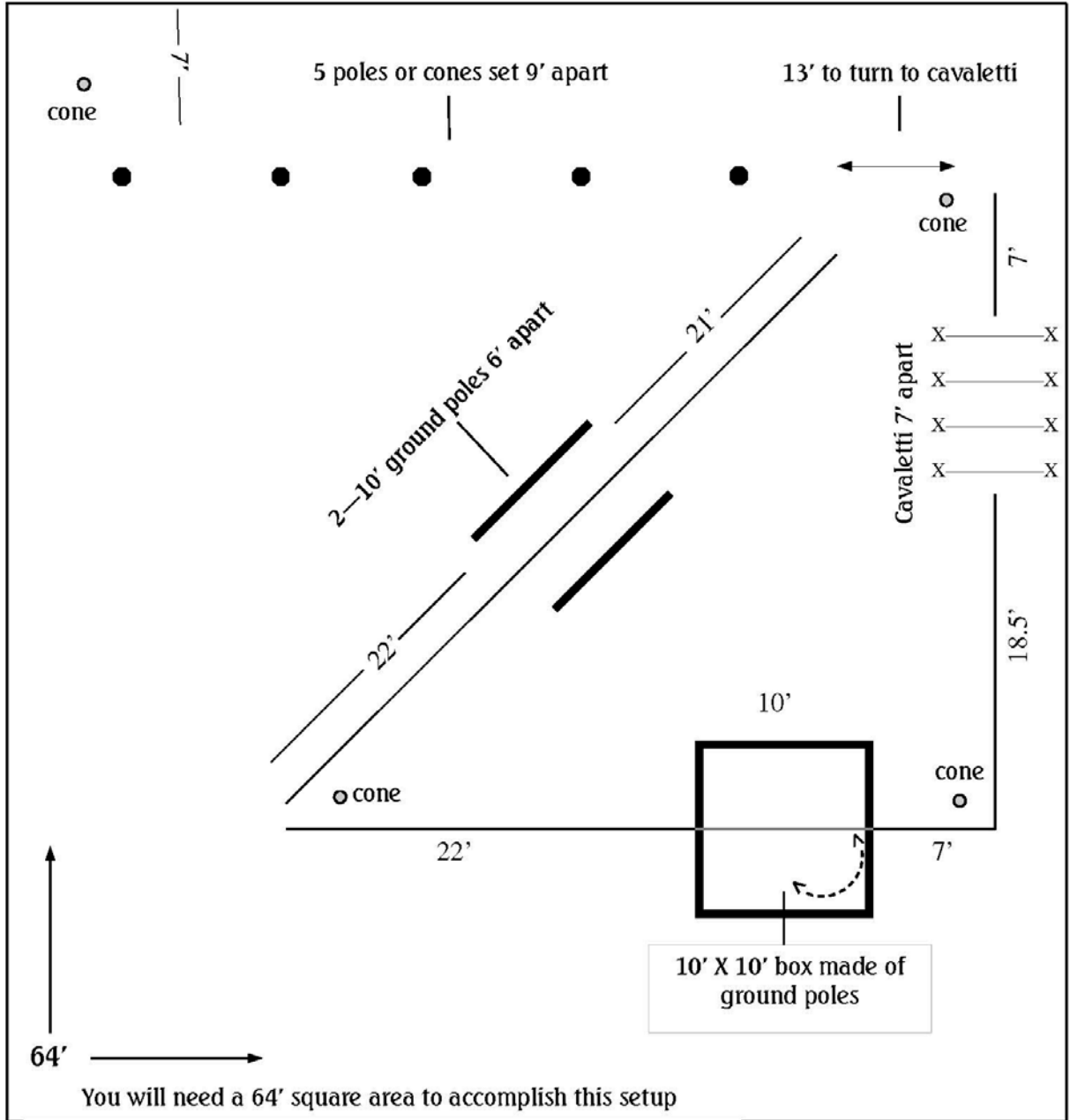
The Host Site should provide two clipboards. We have only allowed 25 minutes per candidate so proximity is important to timing.

The Host Site will need to have a staff member or volunteer available to make copies of the Candidate Cover Sheet for the applicants as they finish testing.

The Host Site will need to provide lunch, water and possibly coffee and snacks to the faculty at the time scheduled for lunch on Skills Test day.

Faculty and center liaison will need about an hour at the end of Horsemanship Skills Test day for final paperwork. The host site may schedule candidates who have previously taken the workshop. The schedule will accommodate as many as 24 tests.

Horsemanship Skills Test Obstacle Course Set-up



**PROPRIETARY EXAM INFORMATION:
 NOT TO BE SHARED WITH CANDIDATES!**

PATH Intl. Horsemanship Skills Test Candidate Testing Schedule

Host Site _____ Date _____

8:00 _____

8:25 _____

8:50 _____

9:15 _____

9:40 _____

10:05 BREAK

10:25 _____

10:50 _____

11:15 _____

11:40 _____

12:05 _____

12:30 LUNCH

1:00 _____

1:25 _____

1:50 _____

2:15 _____

2:40 _____

3:05 _____

3:30 BREAK

3:50 _____

4:15 _____

4:40 _____

5:05 _____

5:30 _____



PATH Intl. ESMHL Skills Test Candidate Cover Sheet

Candidate Name: _____ **PATH Intl. Membership #:** _____

Candidate's Skills Test Results:

- Meets Criteria
- Does Not Meet Criteria

Evaluator printed name

Evaluator signature

Date

Evaluator printed name

Evaluator signature

Date

*A copy of these results must be included in your ESMHL Portfolio to complete your certification
PLEASE RETAIN THE ORIGINAL COPY OF YOUR RESULTS*



PATH Intl. ESMHL Skills Test Candidate Report

Candidate Name: _____ **PATH Intl. Membership #:** _____

Introduction/Initial Approach

Positives (2 points each)	Concerns (0 point)	Automatic Failures
<input type="checkbox"/> Verbal greeting 1.1	<input type="checkbox"/> Failure to greet	
<input type="checkbox"/> Demonstrate method of approach (how to & which part of the horse) 1.2	<input type="checkbox"/> Fails to move horse to safe position	<input type="checkbox"/> Approaching via blind spots
<input type="checkbox"/> Quiet, effective, timely, especially if the horse has rear end facing door/stall guard 1.3	<input type="checkbox"/> Loud, brash approach startling horse	

Haltering the Horse- Position of leader while catching and haltering

Positives (2 points each)	Concerns (0 point)	Automatic Failures
<input type="checkbox"/> Demonstrated proper placement of halter on horse 2.1	<input type="checkbox"/> Halter on too loose, too tight or incorrectly placed <input type="checkbox"/> Method is awkward or too time consuming	<input type="checkbox"/> Halter is put on backwards or incorrectly positioned on horse
<input type="checkbox"/> Demonstrated caution around eyes and ears 2.2	<input type="checkbox"/> Demonstrates a lack of awareness & sensitivity when handling or working around the horse's head	
<input type="checkbox"/> Demonstrates safe method of securing the horse while in the stall 2.3	<input type="checkbox"/> Horse not secure in stall while candidate is attempting to halter i.e. closed or partially closed stall door, lead rope around neck or horse is turned to face the wall	
<input type="checkbox"/> Safe space position in stall 2.4	<input type="checkbox"/> Standing in front of horse <input type="checkbox"/> Being crowded against the wall or in a corner	

Exiting & Entering the stall/paddock

Positives (2 points each)	Concerns (0 point)	Automatic Failures
<input type="checkbox"/> Demonstrate spacing for both leader and horse during exiting or entering stall 3.1	<input type="checkbox"/> Failure to open door completely to accommodate horse & leader <input type="checkbox"/> Horse hits the stall door <input type="checkbox"/> Horse pushes leader into the door	
<input type="checkbox"/> Demonstrate appropriate release of the horse 3.2	<input type="checkbox"/> Standing in front of horse while releasing <input type="checkbox"/> Being crowded against the wall or in a corner while releasing	
<input type="checkbox"/> Demonstrate method of maintaining visual observation of horse while exiting stall after release 3.3	<input type="checkbox"/> Unaware of the horse's movement towards the stall door/gate	
<input type="checkbox"/> Leader leaves stall before or with horse 3.5	<input type="checkbox"/> Horse leaves the stall prior to leader	
<input type="checkbox"/> Turn horse toward the front of the stall prior to release 3.6	<input type="checkbox"/> Failure to turn horse towards the front of the gate/stall door prior to release	
<input type="checkbox"/> Security while releasing the horse, stall door closed prior to release 3.7	<input type="checkbox"/> Horse not secure in stall while being released	

Leading Horse

Positives (2 points each)	Minor Concerns (0 point)	Automatic Failures
<input type="checkbox"/> Demonstrate correct method of holding lead with both hands (unless praising or cueing horse) 4.1	<input type="checkbox"/> Hand too close to halter or too far from halter	<input type="checkbox"/> Lead rope draped over shoulder
<input type="checkbox"/> Demonstrate method of holding lead in folded or figure 8 manner 4.2	<input type="checkbox"/> Lead rope coiled in any manner	<input type="checkbox"/> Lead rope tightly wrapped around hand
<input type="checkbox"/> Demonstrate correct position of leader at halt, walk and turn 4.3	<input type="checkbox"/> Leader too far in front of or behind horse <input type="checkbox"/> Leader crowding the horse or horse crowding the leader	
<input type="checkbox"/> Demonstrate proper hand placement on lead 4.4	<input type="checkbox"/> Overly restrictive use of lead; grabbing buckle of lead rope or halter	
<input type="checkbox"/> Rhythm of active walk is maintained throughout the test and the serpentine 4.5	<input type="checkbox"/> Leader ahead of, dragging, too far back or under the horses feet at halt, walk and turn <input type="checkbox"/> Walk is slow, inactive	
<input type="checkbox"/> Smooth, timely transitions 4.6	<input type="checkbox"/> Transitions are not smooth <input type="checkbox"/> Transitions take too long to happen or are not achieved	

<input type="checkbox"/> Wide, smooth turns observed 4.7	<input type="checkbox"/> Leader pulling ahead of horse <input type="checkbox"/> Horse slows down <input type="checkbox"/> Abrupt or ineffective method of guiding horse on turns <input type="checkbox"/> Turns too sharp	
<input type="checkbox"/> Leader does not contribute to horse stress level when backing up 4.8	<input type="checkbox"/> Horse throwing head up or becoming anxious <input type="checkbox"/> Leader applying constant pressure on nose	
<input type="checkbox"/> Leader promotes straightness using effective aids when backing the horse 4.9	<input type="checkbox"/> Horse's head is pulled around to leader for long period of time. <input type="checkbox"/> Inappropriate aids cause horse to back crookedly.	
<input type="checkbox"/> Organization, effective use of aids and body position shown during ¼ turn in box 4.10	<input type="checkbox"/> Aids, presence and body position are ineffective or casual (sloppy/unsafe) <input type="checkbox"/> Horse steps out of box with any foot <input type="checkbox"/> Horse's hindquarters and forequarters are left facing different directions and not corrected	
<input type="checkbox"/> Demonstrate correct position leading over cavaletti 4.11	<input type="checkbox"/> Getting ahead of horse over cavaletti <input type="checkbox"/> Causing the horse to trip over cavaletti	

Aids - Voice aids/body language/eye/touch and head position

Positives (2 points each)	Concerns (0 point)	Automatic Failures
<input type="checkbox"/> Demonstrate use of clear voice aids with different inflection for upward & downward transitions 5.1	<input type="checkbox"/> No voice aids when appropriate	
<input type="checkbox"/> Demonstrates tone of voice that influences horse behavior 5.2	<input type="checkbox"/> Inappropriate or ineffective use of voice aids.	
<input type="checkbox"/> Demonstrates ability to read horse's mood & respond 5.3	<input type="checkbox"/> Leader not responsive to horse's energy level	
<input type="checkbox"/> Demonstrate body language according to horse behavior 5.4	<input type="checkbox"/> Aggressive, inappropriate body language	
<input type="checkbox"/> Walks with head & eyes forward 5.5	<input type="checkbox"/> Consistently looking at the horse or at the ground unless appropriate over poles or cavaletti	
<input type="checkbox"/> Demonstrate use of aids: voice, body, energy sticks 5.6	<input type="checkbox"/> Inappropriate or lack of use of aids	
<input type="checkbox"/> Demonstrates use of touch aid when appropriate 5.7	<input type="checkbox"/> No touching aids when appropriate	
<input type="checkbox"/> Demonstration of praise/appreciation for work done by equine 5.8	<input type="checkbox"/> No praise when appropriate <input type="checkbox"/> Inappropriate praise such as slapping the neck	

Safety

Positives (2 points each)	Concerns (0 point)	Automatic Failures
<input type="checkbox"/> Closes gate when entering working ring/arena 6.1		<input type="checkbox"/> Failure to close gate when entering ring/arena
<input type="checkbox"/> Planned carefully and safely conducted 6.2		<input type="checkbox"/> Dropped Lead Rope <input type="checkbox"/> Lead rope allowed to drag on the ground
		<input type="checkbox"/> Kneeling on the ground
		<input type="checkbox"/> Approaching horse from blind spot
		<input type="checkbox"/> Abrupt or rough handling of the horse.

- It is expected candidate will use a physical prompt to initiate backing up and/or to establish boundaries
- It is permitted to put the lead in one hand to pat the horse when appropriate
- You may be allowed to choose to use an artificial aid such as an energy stick, carrot stick, dressage whip, crop etc. provided the host site deems it appropriate.

Overall suggested areas of improvement, comments and a list of the criteria number that was performed incorrectly:

CANDIDATE'S TOTAL SCORE:

Highest possible score: 70
Passing score: 58 or higher

Meets criteria

Does not meet criteria

**PATH INTL. EQUINE SPECIALIST IN MENTAL HEALTH
AND LEARNING HORSEMANSHIP CRITERIA**

1. Introduction

- 1.1 Verbal Greeting is given to horse
- 1.2 Demonstrate appropriate method of approach
- 1.3 Quiet, effective, timely approach especially if horse has rear end facing person

2. Haltering

- 2.1 Demonstrate proper placement of halter on horse
 - Candidate does not stand in front of the horse, stands on the left side of the horse
 - Halter is placed on the horse correctly, not to tight or to loose
- 2.2 Demonstrate caution around horse's eyes and ears
- 2.3 Demonstrate safe method of securing the horse while in the stall/paddock
- 2.4 Demonstrate safe space position in stall/paddock

3. Exiting and Entering Stall/Paddock

- 3.1 Demonstrate spacing for both leader and horse during exit/enter of stall or paddock
 - Open stall or paddock door completely when exit/entering
- 3.2 Demonstrate appropriate release of horse
- 3.3 Demonstrate method of maintaining visual observation of horse while exiting stall
- 3.4 Close gate to paddock or stall door only if center/situation requires it
- 3.5 Leader leaves stall before or with the horse
- 3.6 Turn horse towards the front of stall/paddock prior to release
- 3.7 Security while releasing the horse, gate or stall door closed prior to release/catch

4. Leading

- 4.1 Demonstrate method of holding lead with both hands (unless praising or cueing horse)
- 4.2 Demonstrate method of holding lead in a folded or figure 8 manner
- 4.3 Demonstrate correct position of leader at halt, walk and turn
- 4.4 Demonstrate proper hand placement on lead rope, not grabbing buckle of lead rope or halter
- 4.5 Rhythm of active walk is maintained throughout testing and in serpentine
- 4.6 Demonstrate smooth, timely transitions
- 4.7 Demonstrate wide, smooth turns

- 4.8 Leader does not contribute to horse stress level (throwing head up, pulling up)
- 4.9 Leader promotes straightness of horse when backing up
 - Horses' head is not bent or being pulled toward the leader
- 4.10 Organization, effective use of aids and body position shown during ¼ turn in box
- 4.11 Demonstrate correct position leading over cavaletti

5. Aids

- 5.1 Demonstrate use of clear voice aids with different inflection for upward & downward transitions
- 5.2 Demonstrate tone of voice that influences horse
- 5.3 Demonstrate ability to read horse's mood & respond
- 5.4 Demonstrate body language according to horse behavior
- 5.5 Walk with eyes forward and head up except when going over poles or cavaletti
- 5.6 Demonstrate use of aids: voice, body and energy sticks
- 5.7 Demonstrates use of touch aid when appropriate
- 5.8 Demonstration of praise/appreciation for work done by equine

6. Safety

- 6.1 Closes gate when entering working ring/arena
- 6.2 Overall Safety
- 6.3 Planned carefully and safely conducted

7. Automatic Failures

- 7.1 Abrupt or rough handling of horse
- 7.2 Lead rope allowed to drag on the ground
- 7.3 Lead rope draped over shoulder
- 7.4 Lead rope tightly wrapped around hand
- 7.5 Halter is put on backwards or incorrectly positioned on horse
- 7.6 Failure to close gate when entering working ring/arena
- 7.7 Consistently dropping lead rope
- 7.8 Kneeling on the ground
- 7.9 Approaching horse from blind spot

PATH Intl. On-Site Instructor Workshop and/or On-Site Registered Certification

Final Accounting Statement

To be filled out by the Host Site with assistance from the Lead Evaluator and returned to the PATH Intl. office with 2 weeks following the conclusion of the event or a \$40 late fee will apply.

Faculty/Evaluators: _____

Date of Workshop and/or Skills Test: _____

Host Site: _____

Accounting Statement Summary Information

- _____ Number of Participants attending workshop only
- _____ Number of Auditors attending workshop only
- _____ Number of Candidates attending Skills Test only
- _____ Number of Participants completing both workshop and Skills Test

On-Site Workshop and/or Certification Final Payment/Refund Calculation

Overall number of Candidates in Horsemanship Skills Test: _____ x \$40.00 = \$ _____

Additional workshop participants _____ x \$60.00 = \$ _____

Materials Order Form Late Fee (applicable if fee noted by PATH Intl.) \$40 \$ _____

Materials Express Shipping Costs (applicable if fee noted by PATH Intl.) \$ _____

Workshop Manuals Returned – Manual Restocking Fee (_____ x \$60.00) – (_____ x \$25.00) = \$ _____

TOTAL \$ _____

Please Note: Participants may not send PATH Intl. individual checks to pay the workshop and or skills test fee. One large check must be issued from the center to PATH Intl. for all fees. Thank you!

TOTAL DUE TO PATH Intl. \$ _____

OR

TOTAL TO BE REFUNDED TO HOST SITE \$ _____

For Office Use Only	Initials
_____ # of Manuals Returned	_____
_____ # of Damaged Manuals	_____
OR	
_____ # of Quality Manuals	_____
_____ # Invoiced	_____

Signature – Host Site Representative _____ Date _____

All above materials and paperwork must be returned to the PATH Intl. office within **two weeks** of the last day of the certification or a \$40 late fee will apply.