

MHCGB



JUDGES PANEL APPLICATION FORM

Title (Mrs/Ms/Miss/Mr/Other (please state))				
Address				
Are you over 21? Yes No				
Telephone numbers: Landline Mobile				
Email address:				
Please continue overleaf if insufficient room for answers.				
If you are an existing panel judge please list which panels you are on and when you were appointed to them:				
Panel	Date Appointed			
If so please list current years judging appointments:				
Show	Classes Judged			

What experience of miniature horses do you have?

Why do you wish to be considered for the MHC	GB panel?
What positive attributes will you bring to the M	HCGB judges panel?
At this time what is your understanding of the A	MHA?
What significant issues are you aware of when j	udging miniature horses?
Do you have any personal connections to any of	ficial or director of MHCGB?
• Yes – if so whom? References	No
they will only be contacted if considerat	irm they are willing to act in this capacity and tion is being made to approve your application re existing panel judges (any recognised panel
Name	Name
•	•

I understand the information given in this application form will be used as part of the assessment process. I also confirm that I have read the MHCGB rules and fully accept the code of conduct whilst I am being assessed.

There are no reasons to prevent me from undertaking the assessment or if successful any
judging appointment in the UK. This includes physical ability and any legal restraints due to
investigation or conviction of an offence covered by the vetting and barring disclosures.

Signature	Date

All information given will be treated confidentially and only used for the purposes of assessing suitability to be an MHCGB panel judge. However, if successful then it will be retained for the duration you remain on the MHCGB panel.

OFFICE ONLY

Assessment:	Date:	
Assessor:	Approved:	Yes No