



USHJA Mentor Program Questionnaire

Personal Information

Name: _____ USEF/USHJA #: _____
Farm Name: _____
Address: _____
City: _____ ST: _____ Zip: _____
Country: _____
Phone Number: _____ Fax: _____
E-Mail: _____ Personal Website: _____
Number of Years in the horse business: _____ USEF Zone: _____

Name of Professional you would like to mentor: _____

Are you a Licensed Official?: _____
If yes, what cards to you hold? : _____

Do you give clinics?: _____
If yes, how many per year?: _____

Do you organize clinics?: _____
If yes, how many per year?: _____

Do you currently sit on USEF and/or USHJA Committees?: _____
If yes, which ones?: _____

Disciplines and level of competition (check as many that apply)

- Hunter Local Regional National
- Hunter Seat Equitation Local Regional National
- Hunter/Sport Horse Breeding Local National International
- Jumper Local Regional National International

Please answer in as much detail as possible the following questions:

List your Major Accomplishments (i.e. Top riders you have trained, top horses you have trained, and top horses you have either found or sold)

Briefly describe your background and experience in the business.

Briefly describe what you would most like to learn through this program.

List three to five references:
