

THE UNITED STATES PONY CLUBS, Inc.

The Kentucky Horse Park 4041 Iron Works Parkway, Lexington, KY 40511 (859) 254-PONY (7669)



C-2 HORSE MANAGEMENT TEST SHEET

Candidate's Name _____ Name of Pony Club/Riding Center _____

District Commissioner/Center Administrator _____ Region _____

NOTE: Before beginning test, Examiners must read "Guidelines for Club/Center Certifications- D-1 through C-2" and the C-2 Level Standard of Proficiency (SOP), including "Information for Candidates," "Testing Information," and "Examiners." Examiner must have copy of the SOP with them during test to include Grid and Jumping Exercises chart. Examiner comments must give specific reasons if a candidate does not pass any phase. Examiner may ask questions from previous Standard tests. **Turnout, Bandaging, and Leading & Longeing may be tested separate from other sections. All sections must be passed to be awarded the C-2 HM certification.**

HORSE MANAGEMENT EXPECTATIONS: The candidate should show a solid awareness of cause and effect in horse management skills. Assistance/supervision is allowed in the demonstrations of bandaging, longeing, and loading mount.

TURNOUT/TACK & BITS

- Attire to be correctly formal or informal, in accordance with (SOP).
- Mount to be thoroughly groomed, reflecting regular care with a healthy coat, no sweat or dirt. Mane and tail brushed with little, if any, dandruff. Sheath and udder showing regular attention. Feet picked out showing regular farrier care. Eyes, nose, lips, and dock clean.
- All tack to be safe, clean and properly adjusted, reflecting regular care with metal polished. No jockeys or dust, and all stress points clean.
- Explain reasons for equipment used on own mount for flat work and over fences.
- Demonstrate proper adjustment and reason for tack used on mount.
- Name 3 different snaffle bits.

___ ES ___ MS ___ DNM S

Date Tested _____

Examiner Signature:

LONGEING

- Discuss methods, equipment, and safety precautions for longeing.
- Longe own mount, with assistance if necessary, at walk and trot in both directions in an enclosed area while demonstrating the correct use of equipment, body position, posture, and voice.

___ ES ___ MS ___ DNM S

Date Tested _____

Examiner Signature:

BANDAGING

- Apply a shipping and a stable bandage, under supervision of Examiner, and give reasons for use.

___ ES ___ MS ___ DNM S

Date Tested _____

Examiner Signature:

KEY: ES = Exceeds Standard

MS = Meets Standard

DNMS = Does Not Meet Standard

C-2 HORSE MANAGEMENT TEST SHEET (Continued)

<p>STABLE MANAGEMENT</p> <ul style="list-style-type: none"> Describe caring for a mount efficiently and economically when: <p><i>Stabled:</i> feed and water schedule, minerals needed, clothing, exercise, grooming.</p> <p><i>At grass:</i> safety checks of pasture, fencing, water, mineral supply, shelter, feed, and grooming.</p> 		<p>___ ES</p> <p>___ DNMS</p> <p>___ MS</p>
<ul style="list-style-type: none"> Discuss knowledge of safety measures, preparation and care of mount and equipment on day of strenuous work with consideration for climate and terrain, cooling out, treatment of any injuries, of own mounts condition. Discuss pasture safety and fencing. Name 3 toxic plants in your area and describe appearance. Discuss emergency information that should be posted at all barns. 		<p>___ ES</p> <p>___ DNMS</p> <p>___ MS</p>
<p>BREDS, PARTS OF MOUNT, CONFORMATION & LAMENESS</p> <ul style="list-style-type: none"> Name 5 basic conformation qualities that you want in a mount for your own use, and how they affect the basic movement and soundness (e.g., sloping shoulder means longer stride). Discuss angles of shoulder and hip of own mount. Name and locate on a mount the following unsoundnesses: ringbone, curb, bowed tendons, sidebone, spavin, navicular, splint, thoroughpin, sprains. Identify and/or describe parts of the horse's mouth to include bars, lips, incisors, molars, wolf teeth and canines. Differentiate between: tobiano and overo, dun and buckskin, grey and cremello. Discuss how conformation of own mount is related to breed. 		<p>___ ES</p> <p>___ DNMS</p> <p>___ MS</p>
<p>TRAVEL SAFETY</p> <ul style="list-style-type: none"> Be able to load and unload, with assistance, an experienced, cooperative mount. 		<p>___ ES</p> <p>___ DNMS</p> <p>___ MS</p>
<p>HEALTH CARE AND VETERINARY KNOWLEDGE</p> <ul style="list-style-type: none"> List annual vaccinations and health requirements appropriate for your area. List prevalent internal parasites in your area. Describe routine parasite prevention for your mount. Describe how tetanus and strangles are transmitted. Explain the need for the regular care of teeth. 		<p>___ ES</p> <p>___ DNMS</p> <p>___ MS</p>
<p>KEY: ES = Exceeds Standard MS = Meets Standard DNMS = Does Not Meet Standard</p>		

C-2 HORSE MANAGEMENT TEST SHEET (Continued)

<p>LAND CONSERVATION</p> <ul style="list-style-type: none"> Name the zoning requirements for the county in which you keep your horse. Example: A minimum of 10 acres is required to keep one horse. Know what public land is available for riding in your county. 		<p>___ ES ___ DNMS ___ MS</p>
<p>TEACHING</p> <ul style="list-style-type: none"> Demonstrate a safety and tack inspection for a D Pony Club member under direct supervision of Examiner. Explain to the D member the reason for the check, the process, and any safety issues found. Candidate must bring a letter from DC or CA that he/she is assisting in simple unmounted instructional programs for D-level Pony Club members with supervision. 		<p>___ ES ___ DNMS ___ MS</p>
<p>FOOT & SHOERING</p> <ul style="list-style-type: none"> Recognize farrier tools and know their uses. Discuss the five steps in shoeing. If shod, discuss features of own mount's shoes. 		<p>___ ES ___ DNMS ___ MS</p>
<p>CONDITIONING</p> <ul style="list-style-type: none"> Discuss a six-to-eight-week conditioning and feeding program in preparation for a specific competition of candidate's choice. Indicate three different types of conditioning work (e.g., hill work, interval training, galloping) that you may be including and expected recovery rates. Know vital signs of own mount at work. Measure and record pulse, temperature, and respiration of a mount at rest under supervision of Examiner, with assistance if necessary. 		<p>___ ES ___ DNMS ___ MS</p>
<p>NUTRITION</p> <ul style="list-style-type: none"> Describe own mount's ration when developing fitness, maintaining fitness, taking day off, sick and roughed out. Look at a feed label and identify sources of protein, carbohydrates, and fat (can bring own label). 		<p>___ ES ___ DNMS ___ MS</p>

C-2 HORSE MANAGEMENT TEST SHEET (Continued)

RECORD BOOK <ul style="list-style-type: none"> Record Book (health, maintenance, vaccinations) must be kept up to date and brought to test. Must have records for at least 9 months prior to test. Records should reflect appropriate depth of knowledge for this level. 	<div style="border: 1px solid black; padding: 5px;"> ___ ES ___ DNMS ___ MS </div>
SAFETY <ul style="list-style-type: none"> Have a knowledge of heat index and explain how this might affect your personal preparation for an outside activity involving horses. List 3-5 signs or symptoms of a concussion. List four circumstances where a helmet is required to participate in USPC activities. List the four steps in the USPC's "Concussion Return to Play" Action Plan for a rider that may have sustained a concussion. 	<div style="border: 1px solid black; padding: 5px;"> ___ ES ___ DNMS ___ MS </div>

COMMENTS (General impressions, suggestions for improvement):

Examiner sign here: _____ DATE: _____

ES _____ MS _____ DNMS _____ PRINT EXAMINER NAME: _____

Sections requiring retesting: (up to total of four)

A candidate may be re-tested as follows:

- Retest to cover not more than four sections of the test.
- Failure of any section on that day will require retaking the entire test.
- A candidate may retest only if the candidate qualifies for a retest by passing the minimum number of sections stated on the test sheet and the original Examiner has recommended the candidate to retest.
- Those testing during the current year have until December 1st of the following year to retest. Candidates must arrange for retests through their DC/CA.

ES _____ MS _____ DNMS _____

Retest Examiner SIGNATURE: _____

DATE: _____