REVISED 5/2003

SUMMARY 4-H Horsemanship Skills EVALUATION SHEET

LEVEL _____

Date _____ Location _____ County _____

Member's Name	Horse's Name	
		Pass or Retest
		Pass or Retest
		Pass or Retest
		Pass or Retest
		Pass or Retest
		Pass or Retest
		Pass or Retest
		Pass or Retest
		Pass or Retest
		Pass or Retest
		Pass or Retest
		Pass or Retest
		Pass or Retest
		Pass or Retest
		Pass or Retest
		Pass or Retest
		Pass or Retest
		Pass or Retest

Please have examiners sign below to verify testing results:

Name _____ Date _____

Name _____ Date _____

Name _____ Date _____

Name _____ Date _____

Name _____ Date _____

Name _____ Date _____

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College of Agricultural Sciences
Cooperative Extension

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WHITE—Examiner PINK—County Office