



## PATH Intl. CTRI®

# Application Pre-Submission Review Request Form

Applicant's Name: \_\_\_\_\_

Applicant's member or customer ID: \_\_\_\_\_

Application Pre-submission Review fee PAID on (date): \_\_\_\_\_

*(This form WILL NOT be accepted before payment is completed)*

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### **CONFIRM: Part I: Evidence of Equine Handling Skills**

- Supervisor information is complete
- 30 clock hours completed
- Dates are provided and legible for all hours/activities listed

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### **CONFIRM: Part II: Documentation of Equine Management Skills**

- Supervisor information is complete
- All relevant checkboxes are checked OR certificate program, course or certification information is complete

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### **CONFIRM: Part IV: Evidence of working with individuals with disabilities**

- 25 clock hours completed
- Dates are provided and legible for all hours/activities listed
- Supervisor information is complete

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### **CONFIRM: Part V: Evidence of supervised instruction of therapeutic riding lessons**

- Supervising CTRI information is complete
- 25 clock hours completed INCLUDING all of the following:
  - 13 clock hours of instructing groups of two or more completed
  - 3 clock hours instructing groups of two or more utilizing three volunteers per rider completed
  - One emergency dismount practiced

***NOTE: For your final application submission, ensure applicant information is complete for all parts and applicant and supervisor signatures are provided wherever requested.***

***Application paperwork without signatures will not be accepted.***