

The Swedish Vallhund Society Judges Application Form

1: Personal Details

Surname:	First Name:	Mr/Mrs/Miss/Ms
Address:	Email:	Phone:
Postcode:	Affix:	JEP Level:
KC Judges Number:		

2: Swedish Vallhund Judging Experience

Please give details of all your Swedish Vallhund judging experience at shows held in the UK.

You may include your future appointments which have been confirmed in writing.

*Only include classes where dogs were actually present and judged.

**Do not include second and subsequent entries.

	Name of Society Holding the Show	Date of Show	Type of Show	Number of Classes Actually Judged *	Number of Dogs Entered **	Actual Number of Dogs Present & Judged
1						
2						
3						
4						
5						
6						
7						
8						
9						
Please use continuation sheet if required			Total			

3: KC Stud Book Entries

List the names and KCSB numbers of any Swedish Vallhund, either owned or bred by you, and entered in the KC Stud Book, by reason of their wins.

	Name of Dog	KCSB No.		Name of Dog	KCSB No.
1			7		
2			8		
3			9		
4			10		
5			11		
6			12		

Were **you** the owner or breeder of at least 3 dogs when they obtained their first entry in the KC Stud Book? **Y / N**

When did **you** own your first Swedish Vallhund registered in your name at the Kennel Club? _____

What year did you actively start exhibiting (showing) a Swedish Vallhund? _____

4: Other Information

If you **do not** own a Swedish Vallhund, please provide brief details of your **main breed only** and relevant experience to date in that breed. Details to include: Name of breed, year started in the breed, number of champions bred or owned by you, and which judging list you are currently on etc.

5: Other CH. Show Judging Experience

Give details of breeds, commencing with pastoral breeds, in which you have already awarded or have been approved to award challenge certificates in the UK.

Breed	Year 1st Awarded CC's	Most Recent Appointment

6: Breed Appreciation Day (B.A.D)

Have you attended a Breed Appreciation Day? **Y / N**

If Yes Date Attended _____. Certificate must be supplied.

7: Multi Choice Exam (M.C.E)

Have you passed a multi choice exam? **Y / N**

If Yes Date Attended _____. Certificate must be supplied.

8: KC/Swedish Vallhund Training Experience

Have you Attended the following? * Date as applicable.

Swedish Vallhund Breed Seminar / Assessment Y / N	
Date:	Copy of certificate enclosed Y / N
Passed / Failed	
Pastoral Group Judging Development Program with credit relevant to Swedish Vallhunds Y / N	
Date:	Copy of certificate enclosed Y / N
Passed / Failed	

I hereby declare that the information I have given is correct, and if at any time altered circumstances render any of my replies inaccurate, I understand to notify the Swedish Vallhund Society immediately.

I also understand that by submitting this application form, I am giving my permission for my information to be displayed on the Swedish Vallhund Society website.

Print Name:

Signed:

Name:

Date:

Please return this completed application form to:
Judges Sub Committee of the Swedish Vallhund Society

Mrs R A Peacock-Jackson
12 The Street
Ashwellthorpe
Norfolk
NR16 1HD

Email: rose@kirkholme.co.uk
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