



AMERICAN FARRIER'S ASSOCIATION CULTURAL EXCHANGE PARTICIPANT APPLICATION

SECTION 1:

First Name: _____ MI: _____ Last Name: _____ Titles (e.g., CF, DVM, etc.): _____
 Address: _____ City: _____ State: _____ Zip: _____ Country: _____
 Home #: _____ Work #: _____ Fax #: _____ Email: _____
 Gender: _____ Date of Birth: _____ AFA #: _____ AFA Certification Level (circle): FC CF CTF CJF TE
 Chapter Member: (circle) Yes No Name of chapter: _____

SECTION 2:

EDUCATION

Circle Last Attended: Primary High School College Vocational Other
 School(s) Attended: _____
 Degree(s) Received: _____

SECTION 3:

HORSESHOEING EXPERIENCE

Date Started: _____ With Whom: _____
 Address: _____ City: _____ State: _____ Zip: _____ Country: _____
 Home #: _____ Work #: _____ Fax #: _____ Email: _____
 Farrier School (if applicable): _____ Date of Graduation: _____
 Current status, type and amount of business: _____

 Other farriers with whom you've worked: _____

 AFA Conventions, Clinics/Seminars, Competitions attended: _____

 Type of exchange:
 _____ 2 - 4 weeks **Application deadline July 15**
 _____ 3 months (traditional exchange) **Application deadline January 1**

SECTION 4:

INCLUDE

1. A letter stating why you should be chosen
2. A minimum of two letters of recommendation from CJF(s)

Recommended:

1. Typed Farrier Resume
2. Photos of work
3. All put together in organized folder

SEND COMPLETED FORM TO:

American Farrier's Association™
 Attention: Cultural Exchange
 4059 Iron Works Parkway, Suite 1
 Lexington, KY 40511
 859.233.7411 (office) 859.231.7862 (fax)
 info@americanfarriers.org