



THE WORSHIPFUL COMPANY OF FARRIERS Farriery Education and Training Limited

Assistant Registrar (Higher Examinations): Captain David Goodall RN, Sheridan House, Keinton Mandeville
SOMERTON, Somerset, TA11 6DX

Application for the Fellowship (FWCF) Examination following completion of the BSc(Hons) Farriery Degree Course

I (please print your full name in block capitals) _____

of (please print your full address in block capitals) _____

having completed the BSc(Hons) Farriery Degree Course and graduated on(dd MMM
yyyy) (this date being not less than 12 months from the date of this examination), and holding an
AWCF Certificate numbered and dated being a practising farrier
registered in Part I of the Register under The Farriers (Registration) Act 1975, hereby make
application to take the Fellowship examination and pay the [required concessionary fee](#).

I have paid my [remittance in settlement electronically](#)

I enclose a cheque made payable to 'Farriery Education & Training Ltd'

Either: I submit five copies of my dissertation, and I hereby assign Copyright of my
FWCF dissertation to the Worshipful Company of Farriers. To take **both** parts.

Or: I submit five copies of my dissertation, and I hereby assign Copyright of my FWCF
dissertation to the Worshipful Company of Farriers. To take **theory** only this session.

Or: I wish to take the Practical part first and will submit my thesis after completion of
the practical. I understand the rules about validity of the practical.

Tick One

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

I attach a copy of the University validated results sheet for the Degree Examinations.

I hereby assign Copyright of my FWCF dissertation to the Worshipful Company of Farriers.

I agree to be bound by such Rules as may be made from time to time by the WCF, and will produce
the Certificate of being awarded the Fellowship, if granted, to the Registrar of the Company for the
time being upon one month's notice given by the WCF.

I understand that should I at any time be removed from the Register of Farriers under the aforesaid
Act, the Company reserves the right to withdraw the Certificates of the award of the FWCF, AWCF
and the DipWCF examinations and expunge my name from the records of the WCF.

My Striker for the Practical Module will be: _____
(Insert Full Name and Qualifications of Striker)

Applicant to sign here _____

Dated this _____ day of _____ 2017