TRINITY
COLLEGE LONDON

Entry form for group and duo exams in music

Completing this form

Trinity College London will use this information for exam administration purposes, conducting and marking exams and assessments, and issuing exam results and certificates.

The data may be shared with Trinity's delivery partners for the purpose of administrating and managing exam sessions, and with third-party suppliers for result entry processing and the issue and dispatch of certificates. For more information explaining how we use your information please see **trinitycollege.com/data-protection**

Please read the notes carefully.

Please use BLOCK CAPITALS throughout, except for the signature. Please write in black ink.

This form should be used for groups of two or more candidates, and all duo entries.

A separate form must be used for each group. Space is given to list the names of up to eight candidates in the group. If you have more than eight candidates in one group, please continue on a separate sheet. Additional sheets should be stapled to the entry form.

Send completed entry forms to your local representative. Do not send entries to Trinity's central office, unless advised to do so by staff at that office.

A Applicant details

Please tick this box if you would like to receive updates about our products and services. * ☐

Name _____

Address _____

_____

_____ Postcode _____

Tel. (day) Area code _____ No. _____

(evening) Area code _____ No. _____

Email _____

Is this the first time you have entered
candidates for a Trinity exam? Yes / No (*Please circle your answer, eg* Ⓨⓔⓢ)

B Exam regulations and data processing consent

Please tick as applicable and sign below.

Exam regulations (*must be completed*)

☐ I agree that I/the candidates will abide by the regulations of Trinity College London as published at **trinitycollege.com/music-regulations**

Candidates under 16

☐ I have obtained parent/guardian consent for the processing of personal data about candidates under 16 for the purposes stated on this form.

Candidates with special needs

☐ I have obtained consent for the processing of sensitive personal data for the purpose of requesting special adjustment.

Candidates and applicants based outside the EEA

☐ I consent/have obtained consent to the transfer of personal data from Trinity to the local area representative/exam centre based in the candidates' locality.

Signature _____ Date _____

C About the exam

For exam dates please contact your local representative, or for UK entries go to trinitycollege.com/music-entry

Centre name _____

Month of exam _____ Year _____

Give dates or times when the candidates are **not** available:

_____

D Group details

Group name |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

Subject |_____| Grade |_|_| Subject code |_|_|_| Fee |_____| Fee type |_|

E Name of school

Complete this section if you want the name of the school on certificates.

School _____

F Candidates with special needs

Number of special needs provision requests _____

*Please complete a special needs provision form for each candidate this applies for. The form can be downloaded from **trinitycollege.com/music-csn** or can be obtained from your local Trinity representative.*

The special needs provision form and appropriate supporting documentation (if required), must accompany the entry.

Please ensure the special needs box is ticked against each provision needed (see section H).

G Total fees

Payment of _____ enclosed for total fees.

*A receipt will be issued only if your name is entered in the **RECEIPT** section at the bottom of the page and a stamped addressed envelope is enclosed with your entry.*

Grade/level codes

IN	Initial
01	Grade 1
02	Grade 2
03	Grade 3
04	Grade 4
05	Grade 5
06	Grade 6
07	Grade 7
08	Grade 8

FC	Foundation Certificate
IC	Intermediate Certificate
AC	Advanced Certificate
FCC	Foundation Choral Certificate
ICC	Intermediate Choral Certificate
ACC	Advanced Choral Certificate

Subject codes

ENS	Ensemble
PSH	Piano Six Hands
PDT	Piano Duet

There is no separate subject code for Choral Assessment.

RECEIPT **A receipt will be issued only if your name is filled in here and a stamped addressed envelope is enclosed with your entry.**

Name _____

For Trinity College London use only

Received the sum of _____

Date _____ Signed _____

H Candidate details

Multiple certificates for groups will be provided automatically at no extra charge.

Please note that for Choral Assessments, certificates will be issued with name of choir only, not with individual names. It is not necessary to list individual names for choirs.

If individual group members' names are not listed, please indicate how many certificates are required.

For each candidate, please give the full name as it should appear on the certificate. Underline the FAMILY NAME clearly below the line.

Candidate 1   Please tick if this is the candidate's first entry ☐
Date of birth └─┴─┴─┴─┴─┴─┘   Male / Female ☐   Special needs? ☐
D D M M Y Y   M or F   (Please tick if applicable – see section F)
Full name └─┴─┘
Unique learner number (see note) └──────────┘ NCN (see note) └──────────┘

Candidate 2   Please tick if this is the candidate's first entry ☐
Date of birth └─┴─┴─┴─┴─┴─┘   Male / Female ☐   Special needs? ☐
D D M M Y Y   M or F   (Please tick if applicable – see section F)
Full name └─┴─┘
Unique learner number (see note) └──────────┘ NCN (see note) └──────────┘

Candidate 3   Please tick if this is the candidate's first entry ☐
Date of birth └─┴─┴─┴─┴─┴─┘   Male / Female ☐   Special needs? ☐
D D M M Y Y   M or F   (Please tick if applicable – see section F)
Full name └─┴─┘
Unique learner number (see note) └──────────┘ NCN (see note) └──────────┘

Candidate 4   Please tick if this is the candidate's first entry ☐
Date of birth └─┴─┴─┴─┴─┴─┘   Male / Female ☐   Special needs? ☐
D D M M Y Y   M or F   (Please tick if applicable – see section F)
Full name └─┴─┘
Unique learner number (see note) └──────────┘ NCN (see note) └──────────┘

Candidate 5   Please tick if this is the candidate's first entry ☐
Date of birth └─┴─┴─┴─┴─┴─┘   Male / Female ☐   Special needs? ☐
D D M M Y Y   M or F   (Please tick if applicable – see section F)
Full name └─┴─┘
Unique learner number (see note) └──────────┘ NCN (see note) └──────────┘

Candidate 6   Please tick if this is the candidate's first entry ☐
Date of birth └─┴─┴─┴─┴─┴─┘   Male / Female ☐   Special needs? ☐
D D M M Y Y   M or F   (Please tick if applicable – see section F)
Full name └─┴─┘
Unique learner number (see note) └──────────┘ NCN (see note) └──────────┘

Candidate 7   Please tick if this is the candidate's first entry ☐
Date of birth └─┴─┴─┴─┴─┴─┘   Male / Female ☐   Special needs? ☐
D D M M Y Y   M or F   (Please tick if applicable – see section F)
Full name └─┴─┘
Unique learner number (see note) └──────────┘ NCN (see note) └──────────┘

Candidate 8   Please tick if this is the candidate's first entry ☐
Date of birth └─┴─┴─┴─┴─┴─┘   Male / Female ☐   Special needs? ☐
D D M M Y Y   M or F   (Please tick if applicable – see section F)
Full name └─┴─┘
Unique learner number (see note) └──────────┘ NCN (see note) └──────────┘

If you are entering more than eight candidates, please tick here, write the names on a separate sheet and staple it to the entry form. ☐