

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.

A Applicant details

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.

Please tick	k 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	
	e first time you have entered es for a Trinity exam? Yes / No (Please circle your answer, eg (Yes))
B Exa	m regulations and data processing consent
Please tic	k as applicable and sign below.
I agre	gulations (must be completed) ee that I/the candidates will abide by the regulations of Trinity College London as shed at trinitycollege.com/music-regulations
Candidat	es under 16
	e obtained parent/guardian consent for the processing of personal data about idates under 16 for the purposes stated on this form.
Candidat	es with special needs
_	e obtained consent for the processing of sensitive personal data for the purpose of esting special adjustment.
Candidat	es and applicants based outside the EEA
	sent/have obtained consent to the transfer of personal data from Trinity to the local representative/exam centre based in the candidates' locality.
Signature	eDate

Notes

Applicant details

The person named in this section accepts responsibility for entering the candidates named on the form.

The named person may be a teacher, a parent/guardian of a younger candidate, or an adult candidate. Where relevant, this person can act on behalf of a school or company.

All communication will be sent to this person and will be sent to the address given here. Trinity cannot accept responsibility if the information given is inaccurate.

Please give telephone numbers at which the named person can normally be contacted.

*If you agree, you will be sent updates about Trinity's products and services from Trinity and our delivery partner/local area representative in your area. You can unsubscribe at any time.

Exam regulations and data processing consent

The person named in section A must tick the relevant consents, then sign and date each form. This constitutes an agreement to abide by Trinity's exam regulations which are published at trinitycollege.com/musicregulations

Information is held in accordance with Trinity's data protection policy – please see trinitycollege.com/data-protection

C About the exam			Notes	
	t your local representative, or for ,	UK entries go to	About the exam Please indicate your preferred venue for exams.	
Centre name			Give the month and year of the exam session for which you are entering.	
Month of exam		Year	Please write here any dates or times during the relevant session at which candidates	
Give dates or times when the o	candidates are not available:		are not available for exam. Details of your local representative can be found at trinitycollege.com/worldwide	
			Representatives will do their best to	
D. Croup details			meet requests to avoid specific dates, but this cannot be guaranteed.	
D Group details			Group details Write in the name given to the group.	
·	p name			
			Write in the subject as it appears in the relevant syllabus (eg Advanced Certificate	
E Name of school			(Ensemble)). Write in the level for the exam – see	
Complete this section if you wa	ant the name of the school on cert	ificates.	table below. Write in the subject code for the exam –	
School			see table below. Show the fee for the exam, and indicate the	
			type of fee: F Full fee	
F Candidates with sp			H Half-fee re-entry (this must be	
Number of special needs provi	sion requests		accompanied by a valid re-entry permit) L Late-entry fee (see late-entry procedure	
	s provision form for each candidat		at trinitycollege.com/music-regulations	
Trinity representative.	/ college.com/music-csn or can be	obtained from your local	Name of school Give the name of the candidates' school,	
	m and appropriate supporting doc	umentation (if required),	if required on certificates.	
must accompany the entry.			Candidates with special needs Please indicate the number of candidates	
Please ensure the special needs	s box is ticked against each provisi	on needed (see section H).	with special needs. Please be aware that no concession can be made in the marking of	
			the exam. If the candidate is under 16 years of age,	
G Total fees			the special needs provision form must be signed by a parent/quardian of the	
,	e		candidate, or a duly authorised agent.	
	your name is entered in the RECI ssed envelope is enclosed with yo		The special needs provision form and proof of the special needs (if required), must accompany the entry. Please see trinitycollege.com/music-csn for more information.	
Grade/level codes		Subject codes	Total fees	
IN Initial	FC Foundation Certificate	ENS Ensemble	Write here the total fees covered by all entry	
O1 Grade 1	IC Intermediate Certificate	PSH Piano Six Hands	forms being submitted. We can only accept cheques from the UK	
02 Grade 2 03 Grade 3	AC Advanced Certificate FCC Foundation Choral	PDT Piano Duet There is no separate subject	and Ireland, which should be made payable to Trinity College London.	
O4 Grade 4	Certificate	code for Choral Assessment.		
05 Grade 5 06 Grade 6	ICC Intermediate Choral Certificate			
07 Grade 7 08 Grade 8	ACC Advanced Choral Certificate			
or duc o	Certificate			
RECEIPT A receipt will be is Name		n here and a stamped addressed	envelope is enclosed with your entry.	
For Trinity College London use only				
Descived the sum of				

Signed ___

Date _____

H Candidate details

Unique learner number (see note)

Candidate or parent/legal guardian email (see note) L

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 <u>FAMILY NAME</u> clearly	below the line.		and government bodies. This i
Candidate 1	Please tick if t	his is the candidate's first entry	may be communicated to exa centres and our results proce
Date of birth	Male / Female L. M or F	Special needs? [] (Please tick if applicable – see section F)	providers for administrative p Tick the box if the candidate h needs requirements. See sect
Full name L L L L L L L L L L L L L L L L L L L			Write in each candidate's full
Unique learner number (see note)			be the name printed on certifi You must confirm the names
Candidate or parent/legal guardian email (see note)		taking part on the day of the d list of candidates should be ha
Candidate 2	Please tick if t	his is the candidate's first entry	examiner at the time of the ex
Date of birth D D M M Y Y	Male / Female L M or F	Special needs? [] (Please tick if applicable – see section F)	particularly important in the c groups.
Full name L L L L L L L L L L L L L L L L L L L			Unique learner number In the UK, candidates studying
Unique learner number (see note)		NCN (see note)	Government Diplomas are abl
Candidate or parent/legal guardian email (see note)		duo music graded exams towa Additional/Specialist Learning
Candidate 3	Please tick if t	his is the candidate's first entry	these qualifications. To enable of exam data to the relevant t
Date of birth	Male / Female L M or F	Special needs? [] (Please tick if applicable – see section F)	candidates/centres must subr unique learner number as par process. For more information
Full name L			how we use your information p
Unique learner number (see note)		NCN (see note)	trinitycollege.com/data-protec
Candidate or parent/legal guardian email (see note)		National centre number (NC For UK applicants: If you teach
Candidate 4	Please tick if t	his is the candidate's first entry	candidates for a school or a co add the national centre numb
Date of birth	Male / Female L	Special needs? [] (Please tick if applicable – see section F)	we can pass on the information Department for Education, for
Full name L L L L L L L L L L L L L L L L L L L			the achievement and attainme This data is passed to the Depa
Unique learner number (see note)		L NCN / CSL	for Education in confidence. Fo
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Notes

Candidate details

Please refer candidates to trinitycollege.com/ data-protection for information about how Trinity will use their personal data.

Write in each candidate's date of birth and gender. We are required to collect this information for various education information miners, exam essing service ourposes.

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name. This will icates.

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