

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 three or more candidates, and all pair 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 **Yes**)

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/drama-regulations

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

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/drama-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/drama-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/drama-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
BR	Young Performers Bronze
SI	Young Performers Silver
GO	Young Performers Gold

Subject codes: Pair exams

PAC	Acting (Pair)
PMT	Musical Theatre (Pair)
PPA	Performance Arts (Pair)

Subject codes: Performance Certificates

YP	Young Performers
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Subject codes: Group exams

GAC	Acting (Group)
GCS	Communication Skills (Group)
GMT	Musical Theatre (Group)
GPA	Performance Arts (Group)

'In Production' exams

PPO	Plays in Production – Performance Only
PDT	Plays in Production – Performance, Design and Technical
PRM	Musical Theatre in Production – Performance Only
MDT	Musical Theatre in Production – Performance, Design and Technical
PAR	Performance Arts in Production – Performance Only
ADT	Performance Arts in Production – Performance, Design and Technical

Notes

About the exam

Please indicate your **preferred** venue for exams.

Give the month and year of the exam session for which you are entering.

Please write here any dates or times during the relevant session at which candidates are **not** available for exam.

Details of your local representative can be found at trinitycollege.com/worldwide

Representatives will do their best to meet requests to avoid specific dates, but this cannot be guaranteed.

Group details

Write in the name given to the group. Please try to make sure that this name easily identifies the group and is unique ('Group 2' is not a good name).

Write in the subject as it appears in the relevant specifications (eg Musical Theatre (group)).

Write in the level for the exam – see table below.

Write in the subject code for the exam – see table below.

Show the fee for the exam, and indicate the type of fee:

- F Full fee
- H Half-fee re-entry (this must be accompanied by a valid re-entry permit)
- L Late-entry fee (see late-entry procedure at trinitycollege.com/drama-regulations)

Name of school

Give the name of the candidates' school, if required on certificates.

Candidates with special needs

Please indicate the number of candidates 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, the special needs provision form must be signed by a parent/guardian of the candidate, or a duly authorised agent.

The special needs provision form and proof of the special needs (if required), must accompany the entry. Please see trinitycollege.com/drama-csn for more information.

Total fees

Write here the total fees covered by all entry forms being submitted.

If information on fees is required, please contact your local representative – details at trinitycollege.com/worldwide. Fees for exams in the UK and Ireland can be found at trinitycollege.com/drama-entry

Cheques should be made payable to Trinity College London.

H Candidate details

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
D D M M Y Y

Male / Female
M or F

Special needs?
(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
D D M M Y Y

Male / Female
M or F

Special needs?
(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
D D M M Y Y

Male / Female
M or F

Special needs?
(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
D D M M Y Y

Male / Female
M or F

Special needs?
(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
D D M M Y Y

Male / Female
M or F

Special needs?
(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
D D M M Y Y

Male / Female
M or F

Special needs?
(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
D D M M Y Y

Male / Female
M or F

Special needs?
(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
D D M M Y Y

Male / Female
M or F

Special needs?
(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.

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 and government bodies. This information may be communicated to examiners, exam centres and our results processing service providers for administrative purposes.

Tick the box if the candidate has any special needs requirements. See section F.

Write in each candidate's full name. This will be the name printed on certificates.

You must confirm the names of candidates taking part on the day of the exam – a list of candidates should be handed to the examiner at the time of the exam. This is particularly important in the case of large groups.

Unique learner number

In the UK, candidates studying for the Government Diplomas are able to submit pair drama graded exams towards the Additional/Specialist Learning unit of these qualifications. To enable the transfer of exam data to the relevant bodies, candidates/centres must submit their unique learner number as part of the entry process. For more information explaining how we use your information please see trinitycollege.com/data-protection

National centre number (NCN)

For UK applicants: If you teach your candidates for a school or a college please add the national centre number so that we can pass on the information to the Department for Education, for inclusion in the achievement and attainment tables. This data is passed to the Department for Education in confidence. For more information explaining how we use your information please see trinitycollege.com/data-protection

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

