

**Cecchetti Society of Canada
2017 Examination Application**

MAESTRO ENRICO CECCHETTI DIPLOMA

Tour Number:	(Head Office)
Examination Dates:	

CANDIDATE DETAILS	
First name:	Last name:
CSC Membership number:	
Personal mailing address:	
City, Province:	Postal code:
Phone:	Email:
Birthdate:	Age (must be 18 or older):

EXAMINATION DETAILS
City, province:
Preferred examination location and month:
Details to be arranged with the Canadian Examination Administrator

EXAMINATION	
	ENRICO CECCHETTI DIPLOMA (Part A)
	ENRICO CECCHETTI DIPLOMA (Part B)
	ENRICO CECCHETTI DIPLOMA (Part A & B combined)

Please list your previous major examinations taken in this faculty

QUALIFYING & MAJOR EXAMS (Name & Category)	DATE	EXAMINER	RESULT
Advanced I			
Advanced II			
Intermediate			

Cecchetti Society of Canada
2017 Examination Application

(Form A012)

MAESTRO ENRICO CECCHETTI DIPLOMA

TEACHER INFORMATION TO WHOM RESULTS WILL BE MAILED	
Teacher's Name:	
Teacher's Mailing address:	
City, Province:	Postal code:
Phone:	Email:

OTHER TEACHERS WHO HAVE COACHED YOU IN THE PAST 6 MONTHS.

*(After completing this form, candidates should **not** receive instruction from any Examiner, other than those named above.)*

Procedures for submitting your Diploma examination application:

A non-refundable deposit of \$150 for this examination along with application is required in order to reserve your examination.

Deposits:

For examinations in:	Deadline for deposits and application form:
Spring/Summer (March – June)	October 1
Summer School	January 1
Fall/Winter (November – February)	May 1

Please mail your deposit with this application form (A012) to:

Susan Sheffield
Canadian Examination Administrator
525 Lorne Street, Gravenhurst, ON P1P 1N1

There are no refunds or credits provided if examination is cancelled. No correspondence concerning the result of the examination may be entered into. The decision made by the Examiners is final.

Permission for CSC to collect personal e-mails to send information regarding upcoming summer schools, workshops etc.

If you are a CSC member, you may be entered by a teacher or by yourself. If you enter yourself please sign on both lines.

Non-members must be entered by a CSC member.

Signature of Candidate: _____ Date: _____

Print Teacher's Name: _____

Teacher's Signature: _____ Date: _____