

Examination Entry Form & Timetable

| Name of School: Principal's Name: | Address of School (Address examination session is to be held): | |
|-----------------------------------|---|--|
| ARBTA | Address of Teacher | |
| Membership No: | (Address examination results | |
| Contact | and certificates will | |
| Telephone No: | be sent): | |
| Email Address: | Examiner: | |
| Date of Exam: | Examiners Email: | |
| Travel Details: (By | | |
| road or rail for | | |
| examiners) | | |

All teachers involved in the preparation of candidates and guiding though the examination. Please ensure the teachers number below corresponds with the 'Teachers Number' column on the timetable.

| Teacher No: | Name: | Membership No: |
|-------------|-------|----------------|
| 1 | | |
| 2 | | |
| 3 | | |
| 4 | | |
| 5 | | |



ASSOCIATION OF RUSSIAN BALLET & THEATRE ARTS

Examination Entry Form & Timetable

| Name of School: | Examination Date: | |
|-----------------|-------------------|--|
| Principal: | Membership No: | |

| Time | Level | Group | Candidate Number | Name | Age | Mark | Result | Teachers Number |
|------|-------|-------|---------------------|------|-----|------|--------|--------------------|
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