



ST. CECILIA EXAMINATIONS

DIPLOMA ENTRY FORM 2020

Return this fully completed entry form to SCSM Examinations, PO Box 938, Launceston Tasmania 7250

Examination Centre _____

Examination Session: Month: _____ 2020

Your Full Name: First _____

Middle Initial _____ Last Name: _____

Your Full Postal Address: _____

_____ P/Code: _____

Telephone No: () _____

Mobile No: _____

Email Address: _____

Diploma Details: Please ✓ appropriate Diploma.

| | Fees Aus\$ |
|--|------------|
| <input type="checkbox"/> Certificate of Music Teaching* | \$550.00 |
| <input type="checkbox"/> Associate Diploma (Performance)* | \$695.00 |
| <input type="checkbox"/> Associate Diploma (Teaching)* | \$695.00 |
| <input type="checkbox"/> Associate Diploma (Research & Musicology) | \$500.00 |
| <input type="checkbox"/> Associate Diploma (Theory)..... | \$500.00 |
| <input type="checkbox"/> Licentiate Diploma (Performance)* | \$770.00 |
| <input type="checkbox"/> Licentiate Diploma (Teaching)* | \$770.00 |
| <input type="checkbox"/> Licentiate Diploma (Composition)..... | \$550.00 |
| <input type="checkbox"/> Licentiate Diploma (Research & Musicology)..... | \$550.00 |
| <input type="checkbox"/> Licentiate Diploma (Theory)..... | \$550.00 |
| <input type="checkbox"/> Diploma in Church Music..... | \$770.00 |
| <input type="checkbox"/> Fellowship Diploma*..... | \$990.00 |

* Instrument: _____

Duet Diplomas please add 10%

Fee of \$ _____ is attached to this entry form.

By signing this Diploma Entry Form, I, the above-named candidate, acknowledge that I have read and will abide by the current examination regulations and requirements and understand and accept that the examiner's decision is final in all cases. I understand that examination fees will not be refunded or credited.

Signed by Candidate: _____ Date: _____