



NATIONAL MUSIC CERTIFICATE PROGRAM

PO Box 1984, Buffalo, NY 14240-1984 U.S.A.
Tel: 1-866-716-2223 Fax: 1-866-716-2224
www.nationalmusiccertificate.org

Examination Substitute Piece Request Form

This form must be completed and submitted by the deadlines listed below. You will receive notice of whether the request has been approved or denied by mail within four weeks. If approved, then bring the approved form with you to the examination and submit it to the examiner. Approved Substitute Pieces are only valid for the session indicated below.

Candidate Information

RCME Number: _____

Last Name: _____ First Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Daytime Telephone: (____) _____ Home Telephone: (____) _____

Examination Information

1. Specify the examination grade and subject: _____

2. Specify the examination session for which you are registering:

Please Check One:

Spring 2011

Winter 2011

Deadline for Registrations & Substitute Piece requests:

February 22, 2011

TBA

Practical Examinations:

May 9 – June 5, 2011

TBA

Examination Program

Please specify your **ENTIRE** examination program (all pieces and studies). Indicate the substitute piece by checking the appropriate box provided. Fully identify each composition, including opus number, key, movement(s), and composer. **Incomplete applications will be denied.**

✓	Examination Repertoire	
	List A	
	List B	
	List C	
	List D	
	List E	
	Study/Etude	
	Study/Etude	

For Office Use Only

Payment

Substitute Piece Fee: \$ 30 **Method of Payment:** Check Credit Card (Mastercard or Visa)

Credit Card Number: _____ Expiry Date (mm/yy): _____

Cardholder Signature: _____