



NATIONAL MUSIC
CERTIFICATE PROGRAM

P.O. Box 1984
Buffalo, NY 14240-1984

T 866.716.2223
F 866.716.2224

Request for Past Examination Papers

A set of up to four of the most recent examination papers for each of the following examinations are available from National Music Certificate Program for \$10 (per set). Complete and submit this form to National Music Certificate Program by fax or mail. Please allow 3 – 4 weeks for processing and delivery by regular mail.

Contact Information

Have you previously taken an examination with National Music Certificate Program? Yes No
Are you currently studying with a teacher? Yes No

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

Sets of Examination Papers Requested (check all that apply):

ARCT Teacher's Written Papers

- | |
|--|
| <input type="checkbox"/> ARCT Flute Teacher's Written |
| <input type="checkbox"/> ARCT Guitar Teacher's Written |
| <input type="checkbox"/> ARCT Speech Arts & Drama Teacher's Written |
| <input type="checkbox"/> ARCT Violin Teacher's Written |
| <input type="checkbox"/> ARCT Voice Teacher's Written |
| <input type="checkbox"/> Other ARCT Teacher's Written (please specify discipline): |

Comprehensive Theory Examination

- | |
|---|
| <input type="checkbox"/> Comprehensive Theory Examination |
|---|

Speech Arts and Drama Papers (for ARCT Written paper, see above)

- | | |
|--|--|
| <input type="checkbox"/> Level 1 Speech Arts: Technique & Theory | <input type="checkbox"/> Level 1 Speech Arts: History & Literature |
| <input type="checkbox"/> Level 2 Speech Arts: Technique & Theory | <input type="checkbox"/> Level 2 Speech Arts: History & Literature |
| <input type="checkbox"/> Level 3 Speech Arts: Technique & Theory | <input type="checkbox"/> Level 3 Speech Arts: History & Literature |
| <input type="checkbox"/> Level 4 Speech Arts: Technique & Theory | <input type="checkbox"/> Level 4 Speech Arts: History & Literature |

ARCT in Composition and/or Theory Papers

- | |
|--|
| <input type="checkbox"/> Please specify: |
|--|

Payment

Number of Sets: _____ x \$10 = \$ _____ Method of Payment: Cheque/Money Order VISA Mastercard

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

Cardholder Signature: _____