

# Entry form

## Diploma in Music Performance



**You will need to read the Supplementary Information insert before completing the entry form.**

We may not be able to process incorrect or incomplete entry forms and those without the necessary enclosures.

The note numbers in the left margin refer you to specific sections of the Supplementary Information.

**Use this form for:**

- DipABRSM Music Performance
- LRSM Music Performance
- FRSM Music Performance

### 1 Candidate information **all candidates**

Please use **BLOCK CAPITALS**

**note 1**

Candidate/  
Applicant  
Number  if known

Title  for example Dr, Mr, Mrs, Mdme, Miss, Ms

**note 2**

Family name (surname)  Family name first  optional

Given name

Degrees/  
Diplomas

**note 3**

Address line 1

Address line 2

Address line 3

Address line 4

Postcode

Country

Home telephone

Work telephone

Mobile telephone

Fax

**note 4**

E-mail

**note 5**

Date of birth  ddmmyy

**note 6**

Male/Female  M/F

**note 7**

Identification  Passport  National Identity card  Driving licence **A photocopy must be enclosed with this form**

## 2 Exam information **all candidates**

notes 8–10

**Tick one box only**

main instrument

specialist option

no. of players

DipABRSM	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
LRSM	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
FRSM	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## 2a Interpreter **all candidates**

note 11

**I intend to bring an interpreter to my exam**

Yes  **This person must be an independent person who is neither your teacher nor a relative**

No

## 2b Access (for candidates with special needs) **optional**

note 12 **You may tick more than one box**

I need  Braille Quick Study

Large notation Quick Study

Modified staff notation Quick Study – preferred layout must be specified (see note 13)

Large notation Quick Study from memory

Modified staff notation Quick Study from memory – preferred layout must be specified (see note 13)

Time allowance for hearing impairment **please include a letter if you also intend to use a sign language interpreter**

Time allowance for dyslexia/other learning difficulties

Time allowance for autistic spectrum disorders

Other – details attached

note 13 **Documents**  **I enclose an authenticating document confirming my requirements**

## 3 Exam date preferences **optional**

note 14

**Please look up the available months in the *Dates and Fees* leaflet for your country**

Preferred month

## 4 Centre details **all candidates**

note 15

**I would like to take my exam at a public centre**

Public centre name

note 16

**I cannot take my exam at a public centre and would like to take it at the private centre below**

Private centre name

Address Line 1

Address Line 2

Address Line 3

Postcode

Centre phone number

# 5 Checklist

notes 17-20

## DipABRSM

with Substitution

**Prerequisite**  I have **ABRSM Grade 8 Practical**  
(photocopy of certificate or mark form enclosed)

**or**  I am fulfilling the prerequisite through a **Listed Substitution** (substantiating evidence enclosed)

**or**  I am fulfilling the prerequisite through appropriate professional experience and have already gained ABRSM approval (letter of approval enclosed)

## LRSM

with Substitution

**Prerequisite**  I have **DipABRSM (Music Performance)**  
(photocopy of certificate enclosed)

**or**  I am fulfilling the prerequisite through a **Listed Substitution** (substantiating evidence enclosed)

**or**  I am fulfilling the prerequisite through appropriate professional experience and have already gained ABRSM approval (letter of approval enclosed)

## FRSM

with Substitution

**Prerequisite**  I have **LRSM (Music Performance)**  
(photocopy of certificate enclosed)

**or**  I am fulfilling the prerequisite through a **Listed Substitution** (substantiating evidence enclosed)

**or**  I am fulfilling the prerequisite through appropriate professional experience and have already gained ABRSM approval (letter of approval enclosed)

**Requirement**  I enclose my **Written Submission** and **candidate declaration form**  
(6a front & back)

note 21

Family name  
(surname)

Given name

Date of  
submission ddmmyy**Written Submission** (FRSM only)**Please read and sign the declaration****Send this declaration with your Submission**

note 21

**Declaration** I confirm that I have read the regulations in the *Diploma Syllabus* and that:

- The enclosed **Written Submission** is genuinely my work and I am the sole author
- It has not previously been submitted to ABRSM or to any other institution or agency for another academic award
- The sources used and quoted are properly acknowledged and listed
- I have read the section on plagiarism below and understand that I will be penalised or disqualified if a charge of plagiarism is upheld

Signature

Date

 ddmmyy

**Plagiarism** *ABRSM defines plagiarism as an attempt to pass off as one's own the work of others. Thus copying from a printed or unprinted source without acknowledging it, or constructing a précis of someone else's writing without citing indebtedness to that writer, constitutes plagiarism.*

*In preparing the Written Submission candidates are encouraged and expected to read widely to demonstrate the breadth of their reading and, where appropriate, to quote the work of others. However, such quotations and references must be properly and fully attributed in accordance with the advice provided by ABRSM. Candidates who ignore this advice run the risk of being accused of plagiarism.*

*The Chief Examiner will refer any suspected cases of plagiarism to the Diploma Board. The Diploma Board may disqualify a candidate if the charge of plagiarism is upheld. Candidates will have a right of appeal and representation if such charges are made.*

note 21

Family name  
(surname) \_\_\_\_\_

Given name \_\_\_\_\_

Level  DipABRSM  LRSM

Date of exam \_\_\_\_\_ ddmmyy

### Programme Notes (DipABRSM and LRSM only)

Please read and sign the declaration

## Keep this declaration and give it to the examiners at the start of your exam

note 21

**Declaration** I confirm that I have read the regulations in the *Diploma Syllabus* and that:

- The attached **Programme Notes** are genuinely my work and I am their sole author
- They have not previously been submitted to ABRSM or to any other institution or agency for another academic award
- The sources used and quoted are properly acknowledged and listed
- I have read the section on plagiarism below and understand that I will be penalised or disqualified if a charge of plagiarism is upheld

Signature \_\_\_\_\_

Date \_\_\_\_\_ ddmmyy

**Plagiarism** ABRSM defines plagiarism as an attempt to pass off as one's own the work of others. Thus copying from a printed or unprinted source without acknowledging it, or constructing a précis of someone else's writing without citing indebtedness to that writer, constitutes plagiarism.

*In preparing the Programme Notes candidates are encouraged and expected to read widely to demonstrate the breadth of their reading and, where appropriate, to quote the work of others. However, such quotations and references must be properly and fully attributed in accordance with the advice provided by ABRSM. Candidates who ignore this advice run the risk of being accused of plagiarism.*

*The Chief Examiner will refer any suspected cases of plagiarism to the Diploma Board. The Diploma Board may disqualify a candidate if the charge of plagiarism is upheld. Candidates will have a right of appeal and representation if such charges are made.*

## 7 Payment all candidates

note 22

**Fees**  Please indicate your chosen entry option below.  
Refer to the *Music Exams Dates and Fees* leaflet for your country for details of Entry Fees.

	DipABRSM	LRSM	FRSM
I wish to take	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

note 23

I enclose payment of \_\_\_\_\_ refer to the *Dates and Fees* leaflet for your country

I enclose a photocopy (NOT the original) of my identification document

note 24

I have read and undertake to abide by the regulations in the current *Diploma Syllabus*

Candidate's signature \_\_\_\_\_

\_\_\_\_\_  
Date ddmmyy

## 8 Parent/Guardian information under 16

note 25

**If you are under 16 your parent or guardian must complete this section and sign the undertaking below.**

Parent/  
Guardian  
family name  
(surname) \_\_\_\_\_

Given name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postcode \_\_\_\_\_

Country \_\_\_\_\_

**On behalf of the candidate, I have read and undertake to abide by the current *Diploma Syllabus***

Parent/  
Guardian  
signature \_\_\_\_\_

\_\_\_\_\_  
Date ddmmyy

**Please send the form, together with your payment, to your local Representative**  
(see the *Examination Information and Regulations, International Edition*,  
or the *Dates and Fees* leaflet for your country).

Where there is no Representative, send the form and payment to:  
ABRSM  
24 Portland Place  
London W1B 1LU  
United Kingdom

Please mark the envelope 'International exams'.