



**SECTION B – to be completed by candidates who will sit the examination at a Branch or centre**

Date when you propose to sit the examination .....

Address where examination will be held (Please give full street address)

.....

.....

..... Postcode .....

**Note:** examinations may not be held in the home of a candidate.

Please give contact-details of the person responsible for submitting the fees to Headquarters and for organising the examination locally:

Name of Branch Secretary/organiser .....

Address .....

.....

Telephone ..... E-mail .....

Date .....

Please note: when you have completed Sections A and B, this Form along with the appropriate fee, should reach the Branch Secretary or organiser of the examination **no later than seven weeks** before the date of the Examination OR **twelve weeks**, if you require the examination-paper to be translated.

**SECTION C – to be completed by sole candidates who will sit the examination on their own and not under the auspices of a Branch**

Date when you propose to sit the examination .....

Address where examination will be held (Please give full street address)

.....

.....

..... Postcode .....

...../over

**INVIGILATORS**

Please note that the following may **not** act as invigilators:

- anyone related to the candidate by birth or marriage
- anyone in a personal relationship with the candidate
- anyone living with or sharing the same home-address as the candidate
- anyone who has been involved in any way in helping a candidate prepare for the examination.
- invigilators may not be in a personal relationship or share the same home address as each other

[i] Contact-details of Leading Invigilator (see X1-13 for information on who may invigilate):

Leading Invigilator’s Name .....

Leading Invigilator’s official position (see X1-13) .....

Lead Invigilator’s Address: .....  
(Please give full street address)

.....

Telephone ..... E-mail .....

[ii] Contact-details of Second Invigilator:

Second Invigilator’s Name .....

Second Invigilator’s Address .....  
(Please give full street address)

.....

Telephone ..... E-mail .....

Date .....

Please note: when you have completed Sections A and C, this Form along with the appropriate fee, should reach the RSCDS Examinations Officer no later than six weeks (twelve weeks, if you require the examination-paper to be translated) before the date of the Examination.

Return completed form to:

Examinations Officer  
The Royal Scottish Country Dance Society  
12 Coates Crescent  
EDINBURGH  
EH3 7AF

Email : examhelp@rscds.org

**Examination Fee** – Please send a cheque payable to RSCDS or phone 0131 225 3854 to make a credit / debit card payment. Alternative forms of payment are available, including PayPal and bank transfer, please contact us for details.