



# RCM EXAMINATIONS

5865 McLaughlin Road, Unit 4, Mississauga, Ontario, L5R 1B8  
Phone: (905) 501-9553 Fax: (905) 501-1290 www.rcmexaminations.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:

Deadline for Registrations & Substitute Piece requests:

Practical Examinations:

April 2011

January 17, 2011

April 14 – 16, 2011

Spring 2011

March 1, 2011

June 6 – 25, 2011

Summer 2011

June 1, 2011

August 8 – 20, 2011

### 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:  Cheque  Credit Card (Mastercard, Visa or AMEX)

Credit Card Number: \_\_\_\_\_ Expiry Date (mm/yy): \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_