

YAMAHA ELECTONE ACHIEVEMENT TEST (LEVEL 13-10)

PROPOSAL - 2005

Effective 1 April, 2005 till 31 March, 2006

Nous of Toods	
Name of Teacher :	
Address:	
Phone :	
Proposed Venue :	
Address:	
Phone :	
Name of Examiner :	
Electone Models To Be Used :	Teacher
	Student
Course (A or B):	
Proposed Date :	
	(please list detailed test schedule on the REPORT form)
Fee to be charged per student :	\$
Royalty Fee Calculation :	
Number of Candidates	
	(*Including GST)

Please complete this PROPOSAL and forward it to the National Education Administrator at least **ONE MONTH** before the planned date of your Achievement Tests. Please list your detailed test schedule on the REPORT form and also include all student APPLICATION FORMS and a cheque for the appropriate royalty fee. Your proposal will then be approved and the test materials issued.

Date :

Signature: