



Examinations Board

Application to Enter for an Examination/Assessment

(Please complete with block letters)

Surname..... **Title**..... Mr, Mrs, Miss, Ms other

Forenames..... (to appear on certificate) **Tick if under 18**

Address..... **Town**.....

County..... **Postcode**..... **Telephone**.....

Email address **BBKA Membership Number**.....

Please **circle** the Examination(s) / Assessment(s) you wish to enter:

Junior	General Husbandry	Microscopy	Bee Health
Basic	Advanced Husbandry	Show Judge	Bee Breeding
Modules:	March:		November:
	1 2 3 5 6 7 8		1 2 3 5 6 7 8

A cheque payable to the BBKA for £..... is enclosed with this application or I have paid £..... by credit/debit card (by telephone to BBKA Head Office, 0247 6696679). Receipt Number

Applicant, please enter your name and contact details in the box at the foot of the page. Receipts will be sent to the Area Examination Secretary to ensure they have a confirmed record of your entry.

We are committed to helping all people access our examinations including those who have a disability, learning difficulty, dyslexia or a health problem. If you think you will need special consideration such as additional time or other support when taking an exam please tick the box:

SELF CERTIFICATE OF ENTRY QUALIFICATION

I confirm that I meet the Conditions of Entry as stated in the prospectus for this/these Examination/Assessment(s) and I understand that this data will be stored and used for Examinations purposes including the publication of successful results in the BBKA News and on the BBKA Website. Your data will not be passed on to any third party.

Signed:Candidate Signature **Date**.....



British Beekeepers' Association - Examinations Board

Receipt of Application Form

<p>Enter the name and address of your Area Examinations Secretary in this box:</p> <p>Assessment/Exam</p>	<p>Enter your details:</p> <p>Name:</p> <p>.....</p> <p>Email address:</p> <p>.....</p> <p>Telephone number:</p> <p>.....</p>	<p>BBKA Office Use</p> <p>Receipt:</p> <p>Date:</p>
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Forward completed form plus remittance to your Area Association Examination Secretary

