

## MENTOR SIGN-OFF FORM

### The purpose of the Mentor Sign-off form

Due to existing teaching restrictions, the Cecchetti Ballet Australia Associate Diploma Part 1 candidate may only teach and enter students for exams up to and including Grade 3. This Mentor Sign off form, co-signed by both mentor and candidate, enables the candidate to enter Grade 4-6 exam students before full membership is obtained with the Associate Diploma Part 2.

### When to Submit

This Mentor Sign-off form is to be submitted with examination entries.

Date

DD

MM

YYYY

Candidate

First Name

Surname

Mobile Number

Email

Address

City

State

Postcode

Mentor

First Name

Surname

Cecchetti ID:

Level of qualification

### Statement

I [ ] in the role of mentor to  
 [ ] give permission for my candidate to  
 enter their students into Grade 4-6 exams. My candidate has demonstrated the  
 necessary teaching skills and qualities.  
 The undersigned certifies that they are the parent or legal guardian of the designated  
 under- legal-age candidate, and grants permission for said person to participate in the  
 Cecchetti examination.

### Examination Session

Venue

Date (approximate) / month

Additional Information you would like to add.

### Signatures

Mentor

Candidate