



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..... BBKA County Area.....

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

Junior	Basic	General Husbandry	Advanced Husbandry	Microscopy	Show Judge				
Modules: 1(March)	1(November)	2(March)	2(November)	3(March)	3(November)	5	6	7	8

Date of passing Basic Certificate (mandatory except for Basic and Junior applicants)

A cheque/P.O. payable to the BBKA for £..... is enclosed with this application.

Applicant, please enter your name and address 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.

Signature..... Date.....

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: ☐

Your data will not be passed on to any third party.

CERTIFICATE OF ENTRY QUALIFICATION

I certify that the above named Candidate meets the Conditions of Entry as stated in the prospectus for this/these Examination/Assessment(s)

Print name:..... Position:
e.g. Branch committee member or course tutor

Signed: Date.....

Forward completed form plus remittance to your Area Association Examination Secretary



British Beekeepers' Association - Examinations Board

Receipt of Application Form

Enter the name and address of your Area Examinations Secretary in this box, this form may then be used with a windowed envelope:

Enter your name and address in this box:

BBKA Office Use

Receipt:

Date:

Assessment/Exam

