Professional Office Administration Examination Entry Form

Section A (Please complete all of this section)

ABMA Student Number: | | | | | | | | | | | | | |

Surname: .....

First Name: .....

Other Names: .....

Email Address: | | | | | | | | | | | | | | | | | | | | | | | |

I wish to sit for examinations in: March ☐ June ☐ September ☐ December ☐

Please indicate the full name of the college at which you are studying:

.....

.....

College Address: .....

.....

.....

.....

NB You should check with the ABMA Coordinator that your name has been spelt correctly on the ABMA Examination Spreadsheet as this will be entered onto your records and used to produce your results and certificate. If you discover that your name has been spelt incorrectly, you should immediately contact your ABMA Coordinator who will need to resubmit the ABMA Examination Spreadsheet with the correct spelling of your name prior to the exam fee deadline for that series.

Section B

Please complete the 'Exam Fee' box and the 'Total Examination Fees Payable' box and ensure that all forms and payments are forwarded to ABMA before the published ABMA deadlines.

Level 3 Certificate	Exam Fee (£)
Introduction to Office Practices	
Administrative Roles and Responsibilities	
IT Skills	
Communication Skills	
Personal Development and Performance	

FOR ABMA USE ONLY

Bankers Draft	☐
Cheque (with cheque guarantee details)	☐
Postal / Money Order	☐
Exam Fee to Pay	☐
Module Outstanding	☐
Late Entry	☐
Other	☐
Date	
Signature	

TOTAL ENCLOSED EXAMINATION FEES

I enclose the required Examination Fee of:

£

I have read and understood the examination regulations and undertake to comply therewith and I further understand that fees paid are **non-refundable and non-transferable.**

Signature:

Date: