The Australian Kodály Certificate in Music Education Application Form

Full Na	ame:					
(to app	pear on	the certifica	ate)			
Addres	ss:					
		State	Postcode _	Country	·	
Phone	:					
Email:					_	
1.	I wish t			odály Certificate (AKC) s Primary Seconda		
2.	List all	the accredi	ted courses you l	nave completed below.		
		Course		Provider a	and Dates Completed	
 Please attach <u>certified photocopies</u> of your level certificates with subjects and grades for Levels 1, 2 and 3 of your chosen specialisation. 						
4.	Please philoso	enclose a DVD of your teaching demonstrating your understanding of the Kodaly phy.				
5.	Name 1	the accredited lecturer who assessed your song file in Level 3:				
6.		Names and specialisations of AKC graduates may be published (including print and online) by KMEIA.				
		By applying for the award I agree to the publication of my name and specialisation. Signed: Date:				
7.	Please	send all of	the above togeth	er with this application	form to:	

Tess Laird Chair Education Committee, KMEIA, Inc 2 Qantas Court, TOOWOOMBA QLD 4350 Australia

