

**THE DIPLOMA IN SPEECH AND DRAMA EDUCATION
EXTERNAL OBSERVATION REQUEST FORM**

- All sections must be completed in BLOCK CAPITALS, using black ink or black type.
- Completed forms should be sent to: LAMDA Examinations, 155 Talgarth Road, London W14 9DA.

1 Personal Details

Surname/Family Name:		First Names in full:	
Title (Mr/Mrs/Ms/Miss):	Date of birth: Day Month Year		Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>
PIN Number:		Country of Usual Residence:	
Permanent address: Postcode: Telephone: Fax: Email:		Address for correspondence (if different): Postcode: Telephone: Fax: This address will be valid until:	

2 External Observation Request

Place of Observation:

Address:

Name of Supervising Teacher:

Requested dates and times:

1	Date:	Time:
2	Date:	Time:
3	Date:	Time:

You will receive notification from LAMDA of your date and time ten to fourteen days prior to the session.
The lesson plan must be submitted to the examiner on the day of the observation, prior to the start of the session.

3 Fee

Amount enclosed:

- Full payment must accompany this form.
- Cheques to be made payable to LAMDA Ltd.
- Please write your name and address on the back of all cheques.
- If you require a receipt, please enclose a stamped self-addressed envelope.

4 Declaration

I agree to abide by the regulations published in the current *LAMDA Specifications*

Signed:

Date:

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