# 2024 candidate record form

*For examiner’s  
use*

## A-level Music

## NEA component 2 – Performance (7272/P)

Please attach the form to your candidate’s work and send it to the examiner. The declarations should be completed by the candidate and teacher as indicated.

|  |  |  |
| --- | --- | --- |
| **Centre number** |  | **Centre name** |
| Click here to enter. |  | Click here to enter text. |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **Candidate number** |  | **Candidate’s full name** |
| Click here to enter. |  | Click here to enter text. |
|  |  |  |

|  |
| --- |
| Work submitted for assessment **must** be the candidate’s own. If candidates copy work, allow candidates to copy from them, or cheat in any other way, they may be disqualified. |

**Candidate declaration**

Have you received help/information from anyone **other than** subject teacher(s) to produce this work?

No  Yes *(give details below or on a separate sheet if necessary).*

|  |
| --- |
| Click here to enter text. |

Please list below any books, leaflets or other materials (eg DVDs, software packages, internet information, artificial intelligence (AI) tools) used to complete this work **not** acknowledged in the work itself. Presenting materials copied from other sources **without acknowledgement** is regarded as deliberate deception.

|  |
| --- |
| Click here to enter text. |

We may use examples of candidate’s work for standardisation or training purposes.  Please see our privacy notice for more information on how we use assessment data and on your rights under data privacy legislation.

I have read and understood the above. I confirm I produced the attached work without assistance other than that which is acceptable under the scheme of assessment.

|  |  |  |
| --- | --- | --- |
| Candidate signature. | Date | Click here to enter a date. |
|  |  |

**Teacher declaration**

I confirm the candidate’s work was conducted under the conditions laid out by the specification. I have authenticated the candidate’s work and am satisfied (to the best of my knowledge) that the work produced is solely that of the candidate.

|  |  |  |
| --- | --- | --- |
| Teacher signature. | Date | Click here to enter a date. |
|  |  |

|  |  |  |
| --- | --- | --- |
| **Candidate number** |  | **Candidate’s full name** |
| Click here to enter. |  | Click here to enter text. |
|  |  |  |

**To be completed by the candidate**

**Performance assessment evidence**

In addition to the recording(s) of your final performance, you must enclose **one or a combination of the following**, as appropriate, for each of the pieces performed for assessment.

* Notated score
* Lead sheet
* Guide recording (if no score available)
* Annotation (Production only)

Please include full details for each piece in your submission, including the type(s) of evidence you are including for each piece performed, in the table below. When you are indicating your role in the performance(s) below, any instruments (including **non-standard instruments**) being assessed **must** be named.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Composer and title of piece | Grade and exam board (if know) | Your role: instrument/ voice/ music production | Type of evidence  (eg score) | CD track number(s) |
| Click here to enter text. | Click. | Click. | Click. | Click. |
| Click here to enter text. | Click. | Click. | Click. | Click. |
| Click here to enter text. | Click. | Click. | Click. | Click. |
| Click here to enter text. | Click. | Click. | Click. | Click. |

|  |  |  |
| --- | --- | --- |
| **Candidate number** |  | **Candidate’s full name** |
| Click here to enter. |  | Click here to enter text. |
|  |  |  |

**To be completed by the AQA examiner - teachers and candidates should NOT fill these pages in as they relate to the marking of the NEA.**

**Performance assessment grids**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Criteria for the award of marks | Maximum mark | Mark awarded | Comments | | |
| Ambition of project | 5 |  |  | | |
| Technical control | 15 |  |  | | |
| Expressive control | 15 |  |  | | |
| Performance quality | 15 |  |  | | |
| Mark awarded  (max 50) |  | Examiner’s  initials | |  |  |

**Remember** to insert the total mark out of 50 for this component in the box at the top of the form.

|  |  |  |
| --- | --- | --- |
| **Candidate number** |  | **Candidate’s full name** |
| Click here to enter. |  | Click here to enter text. |
|  |  |  |

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| --- |
| Additional assessment comments |