



Music Teachers' Association of California
CERTIFICATE OF MERIT®
CHANGE OF TEACHER FORM
 (Only for use after October 31)

Student Name: _____ Student ID # _____

Instrument: _____ Today's Date: _____

Directions: Please complete and send copies of this form signed by both Teachers plus the Parent, to the Branch Chair(s) of both Teachers. (The Branch Chair for the new Teacher's Branch will forward this form to the CCSR to make the database change. There will be no additional CM fees or fee change required.)

FROM	TO
Teacher Name: _____ Teacher MTAC State ID # _____ Email: _____ Phone: _____ Address: _____ _____	Teacher Name: _____ Teacher MTAC State ID # _____ Email: _____ Phone: _____ Address: _____ _____
PREVIOUS TEACHER I understand that this Student is changing to another MTAC Teacher, and will be taking the CM Evaluation Performance and Theory test under the direction and instruction of that Teacher as the New Primary Teacher. I understand that this Student's online registration will be moved from my online Student list to the new Teacher's online Student list. The new Teacher will now be responsible for continuing the preparation of this Student for CM Evaluations and for entering/editing online evaluation information as needed. If the new Teacher is in a different MTAC Branch, the Student will be evaluated in the new Branch. All CM Results will go to the new Teacher. _____ Signature _____ Date	CURRENT TEACHER I understand that this Student is changing from another MTAC Teacher to me as the New Primary Teacher. I understand that this Student's online registration information will be moved from the previous Teacher to my online Student list, and that I am now responsible for continuing the preparation for this Student's CM Evaluation and for entering/editing all online evaluation information as needed on the MTAC website. If this is a Change of Teacher from a Teacher in a different Branch, the Student will be evaluated in my Branch. All CM results will come to me. _____ Signature _____ Date

PARENT AGREEMENT

I understand and verify that my child is changing from one MTAC Teacher (Previous Teacher) to another MTAC Teacher (New Primary Teacher). My child is registered for CM with the Previous Teacher. I understand that my child's CM Registration will be transferred to the New Primary Teacher, who will be responsible for entering/editing online evaluation information and for continuing my child's CM preparation.

 Parent Name (please print)

 Parent Email Address

 Parent Signature

 Date