



Change of Provision Request

This form is for Schools to inform Ealing Music Service (EMS) of changes to the music provision provided by EMS tutors.

This form must be signed by an authorised school signatory and returned to EMS within the terms of section 7.2 of the Service Level Agreement. If schools wish to change two different provisions, two different requests must be returned.

A School Details			
School		Date	
Music Coordinator/ Head of Music		School Contact (if not Music Coordinator):	
Name		Name	
Email		Email	

B Details of current provision to be changed			
Type of Provision	<input type="checkbox"/> Spark! (WCET) <input type="checkbox"/> Small Group/Individual	<input type="checkbox"/> Ensemble <input type="checkbox"/> Choir	
Instrument(s)		Current day of tuition	
		Current time of tuition	
Current EMS Tutor(s)		Current duration	

C Change day		
<input type="checkbox"/> The school wishes to change the day of the above provision from the start of:	Term:	Year:
Notice of one half-term is required for changes in any provision.		
New day of tuition		

D Change time/duration		
<input type="checkbox"/> The school wishes to change the time/duration of the above provision from the start of:	Term:	Year:
Notice of one half-term is required for changes in any provision.		
New time of tuition	New duration of tuition EMS will confirm additional cost	

E Cancel provision		
<input type="checkbox"/> The school wishes to cancel the above provision from the start of:	Term:	Year:
Notice of one half-term is required for changes in any provision.		
Please state the reason for cancellation:		

The above changes have been agreed by the following signatory:

<input type="checkbox"/> These changes have been discussed and agreed with the EMS tutor(s).		
School's Authorised Signatory	Sign: _____	Name: _____ Title: _____



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EMS102

Additional Notes:

For EMS office use only

- Costs sent to school / n/a
- Costs accepted by school, (correspondence attached)
- Form returned for revisions – see notes
- Provision changed by EMS
- First date of start of provision change __ / __ / ____
- EMS records updated
- Rejected – see notes

Notes