

NAME _____
 SURNAME _____
 LICENCE # _____
 COUNTRY _____

DATE OF EXAM : / /

EXAM PASSED

EXAM FAILED
 (More than 2 mistakes)



NBTA LEVEL 1 – DANCE

MOVEMENTS	PASSED	FAILED
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PART I - AT THE BARRE			
1 a	Feet positions (1 st to 5 th) with Right foot	<input type="checkbox"/>	<input type="checkbox"/>
1 b	Feet positions (1 st to 5 th) with Left foot	<input type="checkbox"/>	<input type="checkbox"/>
2 a	Arm positions (1 st to 5 th) with Right arm	<input type="checkbox"/>	<input type="checkbox"/>
2 b	Arm positions (1 st to 5 th) with Left arm	<input type="checkbox"/>	<input type="checkbox"/>
3 a	Tendus dégagés (1 st position) with Right foot	<input type="checkbox"/>	<input type="checkbox"/>
3 b	Tendus dégagés (1 st position) with Left foot	<input type="checkbox"/>	<input type="checkbox"/>
4 a	Battements tendus (3 rd position) with Right foot (petit/low)	<input type="checkbox"/>	<input type="checkbox"/>
4 b	Battements tendus (3 rd position) with Left foot (petit/low)	<input type="checkbox"/>	<input type="checkbox"/>
5 a	Demi pliés in 1 st position parallel	<input type="checkbox"/>	<input type="checkbox"/>
5 b	Demi pliés in 1 st position	<input type="checkbox"/>	<input type="checkbox"/>
5 c	Demi pliés in 2 nd position	<input type="checkbox"/>	<input type="checkbox"/>
6	Relevé in 3 rd position	<input type="checkbox"/>	<input type="checkbox"/>
7 a	Retirés (1 st position parallel) with Right leg	<input type="checkbox"/>	<input type="checkbox"/>
7 b	Retirés (1 st position parallel) with Left leg	<input type="checkbox"/>	<input type="checkbox"/>
PART II - IN THE CENTER			
8 a	Chassés (to the front) with Right leg	<input type="checkbox"/>	<input type="checkbox"/>
8 b	Chassés (to the front) with Left leg	<input type="checkbox"/>	<input type="checkbox"/>
9 a	Chassés (to the side) with Right leg	<input type="checkbox"/>	<input type="checkbox"/>
9 b	Chassés (to the side) with Left leg	<input type="checkbox"/>	<input type="checkbox"/>
10	Glissade with Right leg and Left leg	<input type="checkbox"/>	<input type="checkbox"/>
11 a	Déboulé to the Right	<input type="checkbox"/>	<input type="checkbox"/>
11 b	Déboulé to the Left	<input type="checkbox"/>	<input type="checkbox"/>
12 a	Lunge to the front with Right leg	<input type="checkbox"/>	<input type="checkbox"/>
12 b	Lunge to the front with Left leg	<input type="checkbox"/>	<input type="checkbox"/>
13 a	Lunge to the side with Right leg	<input type="checkbox"/>	<input type="checkbox"/>
13 b	Lunge to the side with Left leg	<input type="checkbox"/>	<input type="checkbox"/>
14	Twirling spin to the left	<input type="checkbox"/>	<input type="checkbox"/>
15	Twirling spin to the Right	<input type="checkbox"/>	<input type="checkbox"/>

NUMBER OF MISTAKES

INSTRUCTOR'S NAME / COUNTRY :

SIGNATURE :