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|  | **GCSE Drama: Component 2 Programme Proforma** |

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| **Centre Name** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Centre Number** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Telephone No.** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**\*Centres are reminded that if there is any doubt as to the appropriately contrasting nature of texts (Component 2 and Component 3) WJEC should be contacted as soon as possible. Centres should note that a penalty of 5 marks will be applied to any group of candidates who do not adhere to the criteria (please see page 11 of the specification)**

**(This form is to be returned to your allocated examiner by 20January).**

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| **Group number:** | **Chosen text:****\*Date written:** |
| No more than four candidates acting per group**.** Two additional design candidates if required.  | **No. in group** | **Candidate’s Full Name****BLOCK CAPITALS** | **Acting** (**✓ as appropriate)** | **Design Skill** (**✓ as appropriate) skill** | **Character played or design skill selected** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |  |  |
| **5** |  |  |  |  |
| **6** |  |  |  |  |
|  **TOTAL PERFORMANCE TIME:** |
| **Component 3 text:****\*Date written:** |  |  |

|  |  |
| --- | --- |
| **Group number:** | **Chosen text:****\*Date written:** |
| No more than four candidates acting per group. Two additional design candidates if required.  | **No. in group** | **Candidate’s Full Name****BLOCK CAPITALS** | **Acting** (**✓ as appropriate)** | **Design Skill** (**✓ as appropriate) skill** | **Character played or design skill selected** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |  |  |
| **5** |  |  |  |  |
| **6** |  |  |  |  |
|  **TOTAL PERFORMANCE TIME:** |
| **Component 3 text:****\*Date written:** |  |  |

Head of Drama & Theatre: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you wish to do so, please photo-copy this pro-forma for additional groups. Please make sure that each group is given a different consecutive number for identification purposes.