

Recommendation for Prospective Student

The prospective student should provide the information below prior to giving this form to the recommending instructor. The form should then be forwarded directly to the email above. Please **do not** return this form to the University Admissions Office. **This form must be received prior to the student's audition.**

Student Name:		·····			
Mailing Address:					
Phone:	Email:				
Principal Instrument/Voice Part:	Audition Date:				
Recommendation – to the recommendation – to the recommendation Please complete and mail directly to the student's audition. Your prompt reply Name of Person Making Recommendation	he Director of M will be helpful i ation:	n our selection pr	ocess. Thank you	for your help in a	dvance.
Address: Phone:					
In what capacity have you known the					nown the student?
How well do you know the student? V	ery well C	Casually No	t well		
Please rate the student on the followin	g qualities (circle	e one):			
Performing Ability	1	2	3	4	5
Motivation	1	2	3	4	5
Basic Musicality	1	2	3	4	5
Ability to Learn Music Readily	1	2	3	4	5
Sight Reading	1	2	3	4	5
Pitch Sense	1	2	3	4	5
Technical Facility	1	2	3	4	5
Overall Evaluation	1 Low	2	3	4	5 High

Please use reverse for any additional comments.

Date:

_Acess:____