MUSIC TEACHER RECOMMENDATION FORM

Applicant: please fill in the information below, and th	en give this for	m to your musi	c teacher.			
Name Last	First			Middle		
Home Address Street	City			State	Zip Code	
Instrument(s) or voice						
Music Teacher: The above student has applied for adm this student's musical development and potential will b form, and mail it to the address on the back (first-class	e very helpful to	the school in				
How long have you known the applicant (years)?	1 or less	2 3	4 5	6 7 or more		
In what capacity have you taught the applicant? E Private teacherinstrument or voice	nsemble directo		se specify)			
Please assess the applicant in terms of skills and potent	ial in the follow	ving:				
No Basis for Judgment	Below Average	Average	Good	Excellent	Outstanding	
Musicality/Phrasing						
Rhythm						
Pitch, Intonation						
Accuracy in Reading Music						
Sight-Reading Ability						
Memorization Skills						
Consistency of Playing/Singing						
Maturity						
Discipline/Preparation for						
Lessons/Rehearsals						
Musical Growth during your Acquaintance						
Technical Growth during your						
Acquaintance						
Please assess the applicant's interest in a career in musi	c:	ı	1	I		
Very interested Interested with reservations	Not interested	d with reservation	ons Not inte	rested No basis	for judgement	
Print Name	Phone #	Sign	ature			

The School of Music would very much appreciate any additional or information you might wish to provide on the back of this form. Thank you for your time.

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	SECRETARY TO THE UNDERGRADUATE COORDINATOR SCHOOL OF MUSIC BALL STATE UNIVERSITY MUNCIE IN 47306-9986
Comments:	fold here first