



RECOMMENDATION FORM 2010

APPLICANT: Fill out the lines below and give this form to a person well acquainted with your musical abilities.

Last Name/Surname First Name Middle Name

Degree Sought Major (Instrument)

I waive my right to see this recommendation.

I do **not** waive my right to see this recommendation.

Applicant's Signature

Date

RECOMMENDER: Thank you for taking the time to complete this form. Your responses to the following questions will supplement information gained during the audition process so that we may have a more complete idea of the applicant's abilities and stage of development. If you have no basis for answering one of the questions, mark it *no basis for answer*. Please be aware that the applicant may or may not have waived his or her right to see what you have written.

1. What is your relationship to the applicant? _____

2. How long have you known him or her? _____

3. What are the applicant's greatest musical strengths? _____

4. In what musical aspects is the applicant working for improvement? _____

5. For what musical career do you think the applicant is best suited? _____

6. What is your evaluation of the applicant's accomplishments and potential in his or her chosen field. _____

7. What words come to mind when you think of the applicant's personality or character? _____

8. How does the applicant relate to others? _____

9. Feel free to use the back of this form to write anything else you think would give us a better understanding of the applicant.

Please return this form directly to the Director of Admissions and **not** to the applicant. Recommendations need to be in the Admissions Office by February 1 for a February audition (December 1 for Conducting majors) or May 1 for a May audition.

Name (Please print)

Signature

Institution

Position

Date