

STUDENT RECITAL REQUEST FORM

Each featured soloist must submit a separate form.

Name _____ Instructor's Name _____

Accompanist _____ Instructor's Name _____

Instrument or Voice Classification _____

List Other Performers or Ensembles:

Recital Day & Date _____ Recital Time _____

_____ Farrell Recital Hall _____ Performing Arts Hall _____ Other

If other than FRH or PAH, what location: _____

Hearing Date & Time (*must be at least 2 weeks prior to recital date*) _____

Estimated Total Minutes of Music for Your Performance _____

Estimated Total Minutes of Music for **ENTIRE** Performance _____

Date(s) of Performance on Recital Assembly _____

Please check the statement which describes your appearance on this proposed recital:

Degree Recitals		Non-Degree Recitals	
	B.M. Performance Senior Recital		Recital before a required recital
	B.M. Performance Junior Recital		Recital after all required recitals
	B.M. Education Option Senior Recital		Other (please explain)
	B.A. Senior Recital/B. S. Senior Recital		
	B.A. 10-minute performance req. (piano)		

A separate form should be submitted to the Recording Studio for the performance to be recorded.

Student Signature _____ Date _____

Student's Instructor Signature _____ Date _____

Accompanist Signature _____ Date _____

Accompanist's Instructor Signature _____ Date _____

For Department of Music use only:

Calendar Coordinator _____ Date _____

Department Chair _____ Date _____

Recital Credit? _____ Yes _____ No