



Department of Music Student Recital Intent Form

First Name Last Name Instrument UIN

(____)____-_____

Email Address Phone Number

Student sharing half recital Accompanist(s)
(This student must also complete a form)

BM in Performance

- Half Recital
(Required after MUS 180/182)
- Full Recital
(Required after MUS 280/282)
- Optional (Non-required recital)

BM in Jazz Studies

- Half Recital
(Required after MUS 180/182)
- Full Recital
(Required after MUS 280/282)

Reason for non-required recital:

List your recital permission hearing committee members. (Required)

1. _____ (Private Teacher)
2. _____ (Voting Faculty Member)
3. _____ (Third Faculty at Large Present)

Proposed Permission Hearing Date: _____

Proposed Recital Date:

Date Time Location Approval: _____
(A. Hardgrave)

Before completing this form, a room must be reserved with the main office. Dates are subject to availability. Recital Permissions must occur one month prior to the proposed recital date.

Applied Lesson Teacher Signature Lesson Coordinator Signature Student Signature

Submit this form to the Lesson Coordinator at least two months prior to the proposed recital date.

For official use only:

Date form received: _____

Confirmation email sent: _____

Date event put on Calendar: _____