Recital Hearing Form

Date: _______________________________________________

Student Name: ________________________________________

Faculty sponsor: _______________________________________

This recital is a (circle one): Required SR (MUSR 299)  Required JR (MUSR 295)  Elective

Major (circle one): Performance  Musical Arts  MA5

Term: Spring/Fall  20__________

Proposed date for recital: ______________

Repertoire Approved for Recital Performance: ______________

The approval to present the recital listed above has been/has not been (circle one) granted by the listed committee. The recital date shown above is: (check one)

_____ correct  _____ changed to: ____________________

Committee Signatures:

________________________________________

________________________________________

________________________________________

Please return to the Blair Registrar