

AREA RECITAL HOUR PERFORMANCE REQUEST FORM

(please print)

AREA RECITAL HOUR DATE: _____

Date Submitted: _____

Area Recital Performance requests should be submitted no later than 5:00 p.m. on the Tuesday of the week prior to the requested Monday Recital Hour date. *If all information is not complete, the form will be returned to the applied instructor who approved the performance.* Available performance time each Monday is filled on a first-received-first-scheduled basis. You may, however, request placement order on the program.

Performer(s) Name: _____

/___/ Freshman /___/ Sophomore /___/ Junior /___/ Senior /___/ Graduate

Instrument/Voice _____

Accompanist: _____

Instrument/Voice _____

Composition Title: _____

/___/ no movements

/___/ movements _____

(___) *Additional composition/s, composer/s, performing time on the back.*

Composer (full name): _____

Born: _____ Died: _____ Nationality (if known): _____

Performing time: _____ minutes _____ seconds

(Maximum performance time is 10 minutes.)

Faculty Signature: _____

(Following the recital hour, submit to Secretary to Undergraduate Coordinator if approved for performance credit)

Form will not be accepted unless legible and complete.

To submit an Area Recital Hour performance time request, return this form to the Area Chairperson for the area in which you wish to perform.