

**JUNIOR/SENIOR RECITAL HEARING
(Preliminary Presentation)
FACULTY APPROVAL**

The top half of this form is to be completed by the student, brought to the recital hearing and given to the attending faculty. The bottom part is for the faculty only and should be returned to the office **by the faculty**. At least two faculty members must attend the hearing.

Student's Name: _____

Hearing Date: _____

Recital Date: _____

Check One: Junior Recital Hearing Senior Recital Hearing

Complete List of Your Recital Repertoire

| |
|--|
| |
| |
| |
| |
| |
| |

For Faculty Use Only

Check One: Hearing Passed Hearing Not Passed

Faculty Signature: _____

Faculty Signature: _____

**When complete, an attending faculty member should return the entire form to the office.
The form will be placed into the student's file.**