

VCU Department of Music Recital Permission Form

Student Name: _____ Student ID (ex. V00123456): _____

Major: _____ Phone: _____

Instrument: _____ E-mail: _____

I. Private Lesson Instructor Approval

This student is expected to present their JUNIOR SENIOR recital during the FALL SPRING semester of 20____. The student has earned **ACHIEVEMENT LEVEL** _____ through jury examination.

Signature: _____ Print: _____ Date: _____

II. Registration Verification

To complete this portion of the Recital Permission Form, leave this form (with the above portion completed) in the Music Office (Rm. 132, Singleton Center) by 12 p.m. on any weekday for verification by a Music Office staff member. You may retrieve this form after 4 p.m. on the same day.

This student is registered for APPM 394 - Junior Recital APPM 494 - Senior Recital and 1 2 3 credits of Private Lesson APPM _____.

Signature: _____ Date: _____

III. Recital Date Scheduling

Student recitals are scheduled by the Concert Hall/Facilities Manager, Curt Blankenship (Rm. 150, Singleton Center). Student recitals may not be scheduled until the first day of the semester in which it is to be presented. Junior recitals may only be scheduled on weekdays. Recitals may not be presented during exam periods or summer sessions.

This student is scheduled to present his/her recital on (m) _____ (d) _____ at (t) _____ in the Concert Hall Recital Hall

Signature: _____ Date: _____

IV. Jury Selection

Junior and Senior Recitals for degree credit are assessed by a jury committee of three faculty members, to be selected by the student, the private lesson instructor and the area coordinator. Jurors should be full-time faculty members whenever possible. The student's private lesson instructor may be a juror. **Please print the juror's name** and have the faculty member provide a signature to signify that the he/she will serve as a juror on the recital date.

Student's Choice: _____ Juror Initials: _____

Private Lesson Instructor's Choice: _____ Juror Initials: _____

Area Coordinator's Choice: _____ Juror Initials: _____

V. Recital Pre-Hearing

Each student is required to pass a pre-hearing before the recital can be performed. Contact your Area Coordinator.

Pre-Hearing Passed On: (mm/dd/yyyy) _____ Area Coordinator Signature: _____

VI. Recital Grade

Grade: _____ Juror Signature: _____ Print: _____ Date: _____

Juror Comments: