RECITAL REQUEST FORM

(Please confirm information with your teacher and return to the Music Office by March 1.)

NAME_____

TEACHER_____

INSTRUMENT_____

PREFERRED RECITAL DATE (Please list 3 choices, including the specific calendar dates. Options include Mondays 7:30 P.M., Thursdays 11:00 A .M., Thursdays 7:30 P.M.)

[Example: Monday, May 18, 2019, 7:30 pm]

1st choice_____

2nd choice_____

3rd choice			
ard choice			
Jia choice			

CO-RECITALIST (Optional) _____

SPECIFIC RECITAL REQUESTED (Please Check One.)

*Note: Minutes indicated must include time for invocation, stage changes, and applause.

- ____ B.A. Required Junior Recital with a Performance Emphasis (26-30 min.)
- ____ B.S. Music Education Required Senior Recital (14-15 min)
- ____ B.A. Required Senior Recital with a Church Music Leadership Emphasis or with No Emphasis (26-30 min)
- ____ B.A. Required Senior Recital with Performance Emphasis (55-60 min)
- ____ B.A. Required Senior Recital with Composition/Arranging Emphasis
 - ___ Major instrument performance (10 min)
 - ___ Original compositions/arrangements (16-20 min)
- ____ B.A. Required Senior Recital with Music History Emphasis
 - ____ Lecture (20 min)
 - ____ Major instrument performance (10 min)
- ____ Non-required Recital (Please attach a written request explaining the reasons you would like to perform a recital.)

REQUEST FOR RECITAL TIME EXTENSION (Please Check One.)

- ____ 15 min extension
- ____ 30 min extension

____ Other (____ minutes)

RATIONALE FOR RECITAL TIME EXTENSION

Instructor's Signature

Area Coordinator's Signature