

ASBURY UNIVERSITY VOCAL HONORS AUDITION FORM

(Electronic version available at <http://www.asbury.edu/academics/departments/music/music-home/current-student-forms>)

NAME (as you wish it to appear on the program):

ACCOMPANIST'S NAME (as *they* wish it to appear on the program):

TITLE(S) TO BE PERFORMED ON THE PROGRAM (in performance order):

(1)

MAJOR WORK FROM WHICH TAKEN (if applicable):

FULL NAME OF COMPOSER PLUS BIRTH-DEATH YEARS:

EXACT TIMING FOR COMPOSITION #1

(2)

MAJOR WORK FROM WHICH TAKEN (if applicable):

FULL NAME OF COMPOSER PLUS BIRTH-DEATH YEARS:

EXACT TIMING FOR COMPOSITION #2

APPROVAL OF THE VOICE TEACHER:

My signature below indicates this student meets all criteria for the Vocal Honors Audition, is well-prepared, has completed all materials (translations *and* four jury forms to be stapled to this sheet) and has my permission to compete in the annual Vocal Honors Audition:

Signature of Teacher

NOTE: Incomplete application forms (received without all information, including translations & jury forms, may render the applicant ineligible for performance consideration. It is the responsibility of the student and his/her voice teacher to have all completed forms to the Vocal Studies Coordinator one week before the audition. (The program will be typed up that evening.) It is *not* the responsibility of the Vocal Coordinator to track down information needed and students should not expect exceptions to be made.)