Recital Audition Form
Idaho State Department of Music

Note: Recital auditions must be completed at least 30 days before the proposed date of the recital. Submit form, signed by major professor, to music secretary at least one week before the audition.

NAME: ____________________________________ RECITAL DATE: __________________________

INSTRUMENT: _____________________________ AUDITION DATE: __________________________

Recital Type: Senior  Junior  Other  ___________ Degree:  BM  BME  BA  BS

Accompanist: _______________________________ Ensemble Piece: _____________________________

Ensemble Participants: ______________________________________________________________________
_________________________________________________________________________________________
_________________________________________________________________________________________

Faculty Committee: _________________________________________________________________________

Signature of major professor for approval of program listing: ____________________________________

PROGRAM
(List pieces with correct form and in recital order. Please include composer’s dates and intermission. Continue on back side, if necessary.)

Signed: ____________________________________ Approval of audition by Music Faculty Committee

Signed: ____________________________________ Yes  No

Signed: ____________________________________

If audition is not approved, another audition for the same recital date may be scheduled no sooner than two weeks hence. If disapproved a second time, another audition may be scheduled no sooner than the next semester.