Student Name		Recital Date	
		Time	
Performing Medium		<u>Location</u>	
	A Music Ed Recital  Both sides of this form mu  Application Deadline listed on https://wp.stolaf.edu/music-handbook	st be completed  Music Website:	
Student E-mail	student phone #		
	☐ Continuance	☐ Entrance	
Recital Participants Soloist	s class year	instrument/voice type	
Vocalists please r	provide key, op. #, movement number notate if piece is from an opera. <b>Please</b>		
**Important: F	Performances not to exceed 8 min	nutes (see handbook)	
	Performances not to exceed <b>8 min</b> er/instructor: <b>proof-read</b> for complete a		
Faculty member		and accurate information	

## **Student Recital Checklist**

 1. Consult with your teacher
 2. Check the <b>Scheduled Recital Date</b> on the recital date calendar (available online). All persons involved in the performance should be aware of the date, time, and place
 3. Time your performance – not to exceed 8 minutes
 4. Get your teacher's signature on this application form
 5. Return your application form, <i>proofread by your teacher</i> , to the Music Office
 6. Rehearsal times can be reserved with your teacher's permission
7. Have a great performance!