

Department of Music | Application for Junior Recital

Student Name _____

Degree emphasis (BM performance, music ed, etc.) _____

Performance Medium _____

Applied Instructor _____

I understand it is my responsibility to secure all signatures on this form and submit to the Department of Music Office within one week after the recital date.

Student Signature Date

(within first 2 weeks of semester)

1. Advisor verification that student has completed all the prerequisites to the major or is currently enrolled in all remaining prerequisites to the major (lower division music requirements).

Academic Advisor Signature Date

2. Requested recital date and time as approved by applied instructor:

Applied Instructor Signature Date

Name of accompanist and additional performers (if applicable) _____

Accompanist Signature Date

Department Chair Signature Date

(8 weeks prior)

3. Schedule recital hearing date (must occur 4 weeks before recital date):

Date/Time Requested for Recital Hearing

Committee/accompanist hearing date approval:

Faculty Signature Date

4. Hearing date scheduled on department calendar:

Department Technician Signature Date

Faculty Signature Date

Accompanist Signature Date

(immediately after hearing)

5. Upon completion of the recital hearing, the student has:
 Passed
 Not passed

Date/Time CONFIRMED for Recital

Committee/accompanist hearing approval:

Faculty Signature Date

Faculty Signature Date

Faculty Signature Date

(4 wks prior)

6. Pay recital fee - \$75; optional video recording \$25
*Recital fee must be paid prior to the performance or the recital will be cancelled.
Must pay fee to the Cashiers Office (MSR 100) using code T102. Must request two receipts.*

Department Administrative Coordinator Signature Date

(3 weeks prior)

The following will not be approved until the recital fee is paid.

7. Submit *Technical Request Form* for dress rehearsal and recital.
8. Contact School of the Arts for posters: bbeatross@csustan.edu
(poster is optional, design is subject to approval, cost is student responsibility)
9. Submit program information via email to: bbeatross@csustan.edu
a. titles, movements in performance order, composers birth/death dates
b. accompanist name/other performers
c. applied instructor name/degree program

Department Technician Signature (item 7) Date

Applied Instructor Signature (items 8 & 9) Date

(The week after the recital)

10. Upon completion of the recital, student has received:
 Credit
 No credit
11. Deliver completed form to music department office.

Committee recital approval:

Faculty Signature Date

Faculty Signature Date

Faculty Signature Date

Department Administrative Coordinator Signature Date