

# Student Recital Scheduling Approval

\_\_\_\_\_ (Name) \_\_\_\_\_ (Emphasis)  
will be ready to perform on the date entered below, and is approved to schedule a performance date for a degree-related student recital when this form is signed by the Instructor. The recital fee will be forfeited if the scheduled performance date is canceled or postponed.

This student is currently in the **BA BM MA MM DMA PhD** program. (*Circle One*)

Performance to be credited as a **Junior Senior Masters DMA PhD** recital. (*Circle One*)

Performance Date: \_\_\_\_\_ Performance Start Time: \_\_\_\_\_ Venue: \_\_\_\_\_

Dress Rehearsal Date: \_\_\_\_\_ Dress Rehearsal Start Time: \_\_\_\_\_ Venue: \_\_\_\_\_

Recital Fee: \_\_\_\_\_

\_\_\_\_\_  
Student Date

\_\_\_\_\_  
Instructor Date

\_\_\_\_\_  
Accompanist Date

\_\_\_\_\_  
Director of Accompanying Date

\_\_\_\_\_  
Music Dept Scheduling Coordinator Date