



Department of Music
Music Teacher Recommendation

Applicant's Section:

After completing the information in this section, give this form to a music teacher who knows you well and has taught you in your major area (voice, instrument or keyboard). This could be your private teacher and/or your high school vocal or instrumental director. You may make copies of this form and submit more than one recommendation if you wish. The form should be sent in advance of the applicant's scheduled audition date to:

Department of Music Phone: (262) 472-1310 or
College of Arts and Communication 800-621-8744
University of Wisconsin-Whitewater Fax: (262) 472-2808
800 W Main Street
Whitewater, WI 53190

Name of Applicant: Last First Middle

Address: Number & Street City State Zip

Program of studying for which I am applying: Scheduled Audition Date:

- Bachelor of Music with an emphasis in Music Education
Bachelor of Music with an emphasis in Performance
Bachelor of Music with an emphasis in Music History & Theory
Bachelor of Arts in Music

Primary applied area:

- Voice (specify voice type):
Instrument (specify instrument):
Keyboard (specify piano or organ):

Teacher's Section:

This student is applying for admission to the University of Wisconsin-Whitewater in a music degree program. Please give information concerning the quality of his/her musical preparation. The information you provide will be used in determining the candidate's eligibility for the music degree program, and will be destroyed after the admissions decision has been reached.

PLEASE NOTE: THIS FORM MUST BE RECEIVED BY STUDENT'S DATE OF AUDITION.

RATINGS:

Part I: Musical

Please evaluate the applicant's musical ability on the following criteria. If you have no information regarding any of the student's abilities listed here, check "unknown".

Table with 7 columns: Criteria, Outstanding, Above Average, Average, Below Average, Unknown, Additional Comments. Rows include Musical talent, Tone, Sense of pitch/intonation, Rhythmic accuracy, Sight-reading facility.

(continued on back)

	Outstanding	Above Average	Average	Below Average	Unknown	Additional Comments
Performance facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Interpretative skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Preparation for lessons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Part II: Attitudes Toward Study

Ability to:	Outstanding	Above Average	Average	Below Average	Unknown	Additional Comments
Concentrate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Comprehend	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Make decisions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Intellectual curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Interpersonal relationships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Work ethic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Part III: Please use this space for any other comments you wish to make about the applicant. (You may use an additional sheet if necessary)

Please indicate the nature of your association with the applicant (specific classes, ensembles, private study, etc.) and approximate length of time.

Teacher's signature: _____ Teacher's name (print): _____

Position: _____

Professional address: _____

City or town: _____ State/Zip Code: _____

Telephone: _____ Date: _____

**Return this evaluation directly to:
Coordinator of Auditions, Department of Music
University of Wisconsin-Whitewater
800 W. Main Street
Whitewater WI 53190**

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