



PROSPECTIVE STUDENT AUDITION INFORMATION

Date: _____

Student Name: _____

Instrument/ Area: _____

Address: _____

Phone: _____

E-mail: _____

Please place a check mark on the following:

___ Admissible for degree study as a Music Major

___ BA ___ BM ___ BME

___ Conditional Admission (state conditions) _____

___ Not admissible for degree study in music at this time

Please check date of audition

___ January Nordan

___ January

___ February

___ March

___ Other, specify _____