APPLIED VOICE AUDITION FORM

Students Name: Voice Type?:

Major/Minor: Can you read music? Yes \_\_\_\_ No \_\_\_\_

~~Non-majors being considered for lessons must also be willing to register for a vocal ensemble if selected.~~ ~~Will you be able to comply with this requirement? yes no~~ Ensemble Requirement waived this semester.

Have you previously studied voice and if so, for how long?

Prior Teachers:

Play other instruments? (please list)

Foreign Languages studied and for how long:

Email:

Local Address:

Phone: Cell:

If placed with a teacher do you have a preference? Please place X OR leave blank.

 ALAN MARTIN \_\_\_ TODD GRABER\_\_\_

Evaluator’s Comments

TONE

DICTION

SIGHT-READING

OTHER COMMENTS: