



NORTHERN ARIZONA
UNIVERSITY
College of Arts & Letters

School of Music

CONFIDENTIAL RECOMMENDATION FORM

As a student applying for acceptance as a music major or minor, you must request two recommendations, at least one from a music teacher.

Applicant: Please complete the information in this box and give the form, along with a stamped, addressed envelope, to the person making the recommendation. Address the envelope to Admissions, School of Music, Box 6040, Flagstaff, AZ 86011

Name: _____
Last/Family _____ First _____ Middle _____

Permanent address: _____
Street _____
City _____ State _____ Zip _____ Country _____

Principal Instrument or Voice: _____

I waive my right to see this confidential recommendation: _____
Signature _____ Date _____

Recommender: The student named above has applied for admission to the School of Music at Northern Arizona University. Your assessment of the student's musical potential will provide important input to the faculty as it considers acceptance into a degree program and awards music scholarships. Feel free to attach a reference letter or to continue your comments on the back of this form, if more convenient.

How long have you known the applicant? _____

In what capacity have you known the applicant? _____

Please assess the applicant in terms of present skill in the following categories:

	Below average	Average	Good	Excellent	Outstanding	No basis for judgment
Musicality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technical facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rhythmic security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pitch/intonation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sight-reading ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Memorization skill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diction/languages (vocalists)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Music theory basics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal responsibility/maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discipline/preparation for rehearsals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please assess the applicant's interest in a career in music (check one):
 Very interested Not interested No basis for judgment
 Interested but with reservations (specify) _____

What are the applicant's greatest strengths? _____

What areas need improvement? _____

Your name: _____ Date: _____

Signature: _____

For additional information about music opportunities at Northern Arizona University:
 Phone: (928) 523-3731; Fax: (928) 523-5111; nau.edu/music
 PO Box 6040, Flagstaff, AZ 86011