



Student Applicant Recommendation Form

Two recommendation forms are required of all new and transferring undergraduate applicants and must be received by the scheduled audition date. Recommendations must be from teachers or directors, one of which must be from a music teacher or director.

APPLICANT: Please complete only this top section of the form. Please Type or Print Clearly

Applicant Name: _____ **Date:** _____

Intended Major: (check one) _____ Music: Performance Option
_____ Music: Teacher Licensure Option (Music Education)
_____ Bachelor of Arts in Music

Give this form to teachers/directors who are familiar with your musical background and abilities.

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Teacher/Director: Please complete the remainder of this form and mail or fax it to the EIU Music Department as soon as possible. The student will not be admitted to the EIU Music program or considered for scholarship until this form has been received. Recommendations will be kept strictly confidential.

Name _____

School/Employer _____

Daytime phone _____ E-mail _____

Relationship to the applicant _____

How long have you known the applicant? _____

Please indicate with an "X"	Superior	Above average	Average	Below average	Poor	N/A
Musical potential/ability						
Aural skills						
Rhythmic acuity						
Sight reading						
Technical ability						
Practice habits						
Communication skills						
Interpersonal skills						
Initiative						
Poise						
Teaching potential (Music Ed students only)						

Please share any additional qualities or information on the back of this form or in a letter attached to this form.

Signature _____ Date _____

Mail or Fax to: Eastern Illinois University
Department of Music
600 Lincoln Avenue
Charleston IL 61920
Fax: 217-581-7137

Scanned document as an e-mail attachment: music@eiu.edu