APPENDIX A

# CHANGE IN APPLIED INSTRUCTOR REQUEST

You must complete the steps below in order for your change in applied instructor to be **considered**.

1. Consult with your *desired* instructor to determine space availability and willingness to accept you into their studio;
2. Inform your *current* instructor that you wish to move to a different studio;
3. Obtain your *current* instructor's signature after your discussion;
4. Obtain your *desired* instructor's signature;
5. Obtain your area coordinator's signature (if applicable);
6. Obtain Associate Director’s signature;
7. Submit the completed form to Christine Gonzalez for final processing.

**All requests must be completed at least 1 week prior to the first class day of a long semester.**

Name TXST ID

TXST Email Major/Concentration

Number of semesters of lessons completed Date of Request

The above student has expressed to me their desire to move to another studio (in person)

Current Faculty Member’s Signature Date

The above student has expressed their desire to move into my studio and I have determined that I

**do/do not** (circle one) have room in my studio to accommodate their request.

Desired Faculty Member’s Signature Date

Area Coordinator’s Signature (if applicable) Date

Associate Director’s Signature Date

**FOR OFFICE USE:**

Date Received: Date Changed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_