

**Texas State School of Music
Recital Hearing Form ~ Voice**

Recitalist's Name _____ ID# _____

Proposed Recital Date _____ Time _____

- Studio Instructor: _____
- Junior Recital (performance)
 - Senior Recital (music education)
 - Senior Recital (performance)
 - Graduate Recital (performance)

Please provide 8 copies of your recital program as you intend the program to be presented at the recital. Be certain to confirm correct format, composer's names with birth and death dates, and all collaborative artists.

<u>Recital Jurors:</u> (minimum of 3 jurors required)	<u>Date:</u>	<u>Pass/Fail</u>	
_____	_____	Y	N
_____	_____	Y	N
_____	_____	Y	N
_____	_____	Y	N
_____	_____	Y	N
_____	_____	Y	N
_____	_____	Y	N
_____	_____	Y	N

Comments: