UNIVERSITY OF THE
PACIFIC
Conservatory of Music

For Office Use Only: date received _____

STUDENT RECITAL HEARING APPROVAL

Student Name (please print clearly)_____

Major _____

Type of Recital (circle one): **Senior** **Junior** **Non-required**

Recital Hearing Date: _____

Proposed Recital Date: _____

Status (circle one): **PASS** **FAIL**

Signed: _____ **Date:** _____
(Hearing Chairperson)

_____

_____

Instructions:

1. File 2 copies.
2. Send original to the Applied Chair.
3. Applied teacher retains 1 copy.
4. Notify Steve Perdicaris if student does not pass.

The Hearing Committee should contain at least 3 teachers of applied music.

10/24/07