



## MUSIC INSTRUCTOR RECOMMENDATION FORM

Name of Student: \_\_\_\_\_ Instrument: \_\_\_\_\_ Date: \_\_\_\_\_

How long have you worked with this student? \_\_\_\_\_

Please use the following ratings to give us a general idea of the student's abilities, use the comment section to give us more detailed information (use the back of the sheet if necessary). You may substitute a letter of recommendation if you prefer, please try to address the areas listed below in your letter.

5= Excellent    4= Good    3= Average    2= Fair    1= Poor    0= No Opinion

Rating	Comments
_____	Innate Musical Talent _____
_____	Music Maturity _____
_____	Tone Quality _____
_____	Ability to play/sing in tune _____
_____	Technique _____
_____	Articulation/Diction/Bowing _____
_____	Musicality (Phrasing, Dynamics) _____
_____	Sight Reading/Memorization _____
_____	Learning and polishing the music _____
_____	Receptiveness to Instruction _____
_____	Work Habits _____
_____	Honesty and Integrity _____
_____	Social Skills _____

Other significant background, experience or personal observations \_\_\_\_\_

Instructor Signature: \_\_\_\_\_ Instructor Name: (Please Print) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_ email: \_\_\_\_\_

Please return recommendations to:

SVSS School of Music

P.O. Box 3956

Hailey, ID 83333

Phone/Fax: 208-788-4616    email: [education@svsummersymphony.org](mailto:education@svsummersymphony.org)    [www.svsummersymphony.org/education](http://www.svsummersymphony.org/education)