

UTSA Department of Music

Certificate of Recognition in Instrumental Performance

AUDITION/ADMISSION APPLICATION

Student Name _____ Banner ID @ _____

Instrument _____ Email _____

PREREQUISITES (faculty advisor please initial in blanks certifying criteria are met)

- ___ music major (BM concentrations EXCEPT performance; BA in Music)
- ___ completed at least 3 semesters of private instruction and major ensemble at UTSA
- ___ currently enrolled in private instruction at the 2542 level or higher

I, (print name) _____, hereby request permission to play an extended jury audition during the (circle one) FALL / SPRING (year) _____ semester juries to seek admission to the performance recognition program. I understand that the decisions of the jury panels on both this audition and, if approved for admission, the performance certificate recital are final.

student signature *date* *private instructor signature* *date*

faculty advisor signature *date* *area coordinator signature* *date*

OFFICE USE ONLY:

Date of Extended Jury: _____ CIRCLE ONE: *Approved for Recital* / *Not Approved*

Signatures of Panel: _____
Jury member *Jury member* *Jury member*

COPIES TO: 1) student 2) student file 3) private instructor

REQUIREMENTS OF THE PERFORMANCE RECOGNITION RECITAL (IF APPROVED)

- meet with your faculty advisor about coursework needed (i.e. MUS 3543, chamber music, etc.)
- gain approvals from your private instructor, faculty advisor, and area coordinator before enrolling in MUS 3543 (private instruction to be taken during the semester of the recital)
- before the semester of your recital, schedule a one-hour recital with the Events Manager with approvals from the private instructor, area coordinator, and recital committee (3 members, including one faculty member from another area)
- contract and make arrangements to pay for your own accompanist
- gain approvals from your private instructor and area coordinator for the recital repertoire, to include a chamber work
- the performance recognition recital may satisfy the requirement of the proficiency recital

OFFICE USE ONLY:

Date of Recital: _____ CIRCLE RESULT: *Approved for Certificate* / *Passed Proficiency Only* / *Not Passed*

Signatures of Recital Panel: _____
Recital faculty *Recital faculty* *Recital faculty*

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