

## Graduate Recital Preview Approval Form

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***Students must email a copy of the recital program to [gradmus@siu.edu](mailto:gradmus@siu.edu) BEFORE the recital preview.***

Student Name \_\_\_\_\_

MM Concentration \_\_\_\_\_

Emphasis \_\_\_\_\_

Instrument/Voice Type \_\_\_\_\_

Recital Preview Date and Time \_\_\_\_\_

Recital Date and Time \_\_\_\_\_

MUS \_\_\_\_\_

Juror #1 (Primary Instructor): \_\_\_\_\_

After having auditioned this student in significant portions of the recital program,

I approve      I DO NOT approve      the level of literature in the recital program.

I approve      I DO NOT approve      the quality of performance for a public graduate recital.

Juror Digital ID Signature \_\_\_\_\_

Juror #2: \_\_\_\_\_

After having auditioned this student in significant portions of the recital program,

I approve      I DO NOT approve      the level of literature in the recital program.

I approve      I DO NOT approve      the quality of performance for a public graduate recital.

Juror Digital ID Signature \_\_\_\_\_

Juror #3: \_\_\_\_\_

After having auditioned this student in significant portions of the recital program,

I approve      I DO NOT approve      the level of literature in the recital program.

I approve      I DO NOT approve      the quality of performance for a public graduate recital.

Juror Digital ID Signature \_\_\_\_\_