

**AUTHORIZATION AND REQUEST FOR A
VOICE RECITAL HEARING AND ENTRANCE AUDITION**

Student's Name: _____

Email: _____

Hearing type: (Please circle one)

B.M.E. Senior B.S. Senior B.M. Junior B.M. Senior

M.M.E. M.M. #1 M.M. #2 P.D.

Will this hearing be used as an entrance audition for another degree? Y / N

If so, for which degree is the student auditioning:

BM MME MM PD DM

The date requested for the hearing is _____
(Please consult prepared calendar for hearing dates)

The recital is scheduled for _____
(Date of recital)

This hearing is authorized by _____
(Teacher signature)

All applicants for recital hearings before the Voice Faculty of the Indiana University School of Music must present a copy of this authorization, filled out by the applicant's teacher, to the Voice Department Office by the Wednesday previous to the hearing date. The Authorization should be placed in the designated envelope on the bulletin board outside of the Voice Department Office (between MU 105 and MU 104B).

It is the responsibility of the applicant to be present, with accompanist, at the time and place designated for the hearing. Cancellations of hearing appointments should be made by Monday noon immediately previous to the hearing date indicated above.

Instructions regarding Recital Hearings in Voice are available in an envelope on the Voice Department Bulletin Board.