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|-------------------------------|--|--------------------------------------|--------------------------------------|--|
| Student Name                  |  | Semester/Year/Course Number          |                                      |  |
| Instructor                    |  | Voice Type/Instrument                |                                      |  |
| Hearing Type                  |  |                                      |                                      |  |
| <input type="checkbox"/> Jury | <input type="checkbox"/> Pre-Hearing (select one): | <input type="radio"/> Junior Recital | <input type="radio"/> Senior Recital | <input type="radio"/> Senior Lecture Recital |

Rate each category according to the category scale and provide written comments in the space provided

(Tone quality, intonation, posture, pitch accuracy, rhythmic accuracy, sticking, striking area, projection, evenness between hands, ergonomics, efficiency, etc.)

(Phrasing, tempo, dynamics, articulation, stylistic elements, musical sensitivity, memorization & recovery, etc.)

(Historical accuracy of style, dramatic impact, musical line, communication, sound/tone flexibility, colour, expression, rubato, etc.)

(Overall appearance, presentation, preparedness, repertoire selection, performance etiquette, adjudicator copies (if requested), etc.)

Comments:

