Recital Checklist
for the applied teacher’s records

Student ___________________________  junior/recital / senior recital / elective recital
Half recital / full recital

Student’s phone _____________________ email ____________________________

Hearing Date ________________  Time ________________  Location ________________

Recital Date ________________  Time ________________  Location ________________

Committee members


Accompanist ________________  phone ________________  email __________________

Recital Date Request Form [form 2] signed by applied teacher, committee, accompanist and
given to Amy Neace on _____________________ (date)

Recital Program
  Submitted Program Proposal to applied teacher
  Program Approval
  Compile program information and give to applied teacher as an efile
  Applied teacher sent program to Amy Neace via email attachment
  Program proofread by applied teacher
  Program printed

Accompanist should have all music at least 6 weeks before the recital date

  Music was given to accompanist(s) ________________ (date)

Dress Rehearsal Date ________________  Time ________________  Place ________________

Note to faculty: This form is only for your records and can be discarded at your discretion