

BRADLEY

UNIVERSITY

Spring 2012
Fall 2012

MUSIC MINOR
AUDITION FORM

Please fill out the following form and return to: Dr. David Vroman
Department of Music
Bradley University
Peoria, IL 61625 or fax to 309-677-3871

Name _____ Age _____ Today's Date _____

Street Address _____ Telephone () _____

City, State, Zip _____

Email address _____ ACT Score: _____ SAT Score: _____

Check one: Incoming Freshman Transfer Student Current Bradley student

Name of Your Current School _____

Street Address _____

City _____ State _____ Zip _____

Auditioning on: Instrument _____ Voice _____
(name of instrument) (voice part)

Number of year's private study on your major instrument or voice _____

If piano is not your major instrument, have you studied piano? YES or NO If so, for how many years? _____

For the audition, please prepare 2 or 3 selections from the standard classical repertoire that best show your abilities. Pianists and singers should have at least one selection memorized. An accompanist can be provided for campus auditions. Please check YES or NO if you need us to provide an accompanist. If YES, please send copies of the piano accompaniment with this application.

- YES, I will need an accompanist and I have enclosed the music with this form
 NO, I will not need an accompanist

What will be your academic major at Bradley? _____

Career goal _____

Audition Dates: (check preferred date – check preference of morning or afternoon if applicable)

- | | |
|--|---|
| <input type="checkbox"/> Saturday, December 3, 2011 | <input type="checkbox"/> AM only |
| <input type="checkbox"/> Monday, January 16, 2012 | <input type="checkbox"/> AM <input type="checkbox"/> PM |
| <input type="checkbox"/> Saturday, January 21, 2012 | <input type="checkbox"/> AM <input type="checkbox"/> PM |
| <input type="checkbox"/> Saturday, February 4, 2012 | <input type="checkbox"/> AM <input type="checkbox"/> PM |
| <input type="checkbox"/> Saturday, February 11, 2012 | <input type="checkbox"/> AM <input type="checkbox"/> PM |
| <input type="checkbox"/> Friday, February 17, 2012 | <input type="checkbox"/> AM <input type="checkbox"/> PM |
| <input type="checkbox"/> Saturday, February 25, 2012 | <input type="checkbox"/> AM <input type="checkbox"/> PM |
- or, by Appointment: Day _____ Date _____ AM _____ PM _____

List the pieces you plan to perform at your audition.

Composition Title

Composer

1. _____

2. _____

3. (optional) _____

THIS FORM MUST BE RETURNED TWO WEEKS PRIOR TO REQUESTED AUDITION DATE

BRADLEY

U N I V E R S I T Y

Please ask your band, orchestra, or choral director to complete this form. You may wish to have your private teacher submit a recommendation on your behalf as well. This form need not be returned at the same time you submit your request for an audition date and time. Please ask the individual completing this recommendation to mail it directly to:

Department of Music
Attn.: Dr. David Vroman
Bradley University
Peoria, IL 61625
(or fax to 309-677-3871)

_____ student name

Dear Colleague,

The student named above has indicated an interest in the Music Minor program at Bradley University. Your comments pertaining to their predicted success in music at the college level are greatly appreciated and will be held in the strictest confidence. If you would prefer, a letter of recommendation may be sent in place of this form. Thank you.

1. Based on your experience, would you recommend that this student pursue music as a minor?

_____ Yes

_____ No

2. Please comment on applicant's musicianship and performing ability.

3. Please comment on this student's character, attitude, and work ethic.

Signed _____

Printed Name _____

Position _____

Address _____

City, State, Zip _____

Phone _____

Email _____