

Denver School of the Arts

VOCAL MUSIC DEPARTMENT

CONFIDENTIAL RECOMMENDATION FORM

Applicant: Complete the upper portion of this form. Two forms are required.

One (1) academic teacher or community leader.

One (1) music reference from a private or classroom music teacher.

The qualified **adult** may NOT be related to you. The individual should comment on your work and potential as a musical artist in training. This recommendation form should be brought to your audition in a sealed envelope. Front of envelope should include applicant's name and incoming grade. Back of envelope should contain the recommender's handwritten signature over envelope seal. **PROVIDE AN ENVELOPE FOR EACH OF YOUR RECOMMENDERS.**

(Please print or type)

Name of Applicant: _____ Telephone: _____

Address: _____

City

State

Zip Code

The admissions committee seriously considers the personal qualifications of each applicant and appreciates your thoughtful responses to the following items. Please evaluate the applicant as carefully as possible, noting both strengths and weaknesses.

This recommendation is confidential information in the admissions process and should not be given to the applicant. Answer honestly and candidly.

1. State your relationship to the applicant: _____
2. How long have you known the applicant _____
3. Place check marks in the column that best represents your evaluation of the applicant in comparison with other students.

	BELOW AVERAGE	AVERAGE	ABOVE AVERAGE	OUTSTANDING	TOP 1%
INITIATIVE					
DEPENDABILITY					
SOCIAL MATURITY					
SELF-CONFIDENCE					
DISCIPLINED WORK HABITS					
RESPECTFUL BEHAVIOR					
VOCAL SKILL					
CLASSROOM PARTICIPATION					
LEADERSHIP					
OVERALL					

