

APPLIED VOICE REPORT v.2024

ILLINOIS WESLEYAN UNIVERSITY
SCHOOL OF MUSIC

*Please complete the **front side** of this form in consultation with your studio teacher. **Bring four (4) double-sided copies to your jury.**
This sheet must be typed.*

Student's name Studio teacher
 Current sem. & year Class of # of semesters studying voice
 Lesson level (BM, BME, BA, or minor) Average hours practiced/week

Compositions prepared for jury (implies memorization)			
Composer, title	Performed in recital	Begun last sem.	Length (min:sec)
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New compositions not completed for jury	
Composer, title	Composer, title

Technical skills worked on this semester	Ensemble participation, other repertoire

FACULTY USE ONLY

Comments

Faculty Signature _____

Grade _____