

APPLICATION FORM

(please check one)

☐ **CHOIR** - CIRCLE YOUR VOICE PART:

S1 S2 A1 A2 T1 T2 B1 B2

☐ **ORCHESTRA STRINGS** - CIRCLE ONE:

violin viola cello bass

☐ **BAND** - INSTRUMENT: (be specific!)

☐ please consider me for **ORCHESTRA WINDS/PERCUSSION**

Percussion only: Indicate your primary (1) and secondary (2) specialties:

___ Snare ___ Mallets
___ Auxiliary ___ Tympani

Office Use Only

Accept Y N Alt

Ensemble B C O

Section _____

TO BE COMPLETED BY *STUDENT* APPLICANT

Last Name _____

First Name _____

male ___ female ___ non-binary ___ Year you'll graduate _____

Mailing Address _____

City _____

State _____ Zip _____

Parent/Guardian Phone () _____

Student E-Mail _____

T-Shirt Size **S M L XL XXL** _____

Instrument/voice classification _____

(Be Specific! i.e., Tenor II ; alto/tenor/bari sax; baritone TC or BC)

Part you now play/sing in your school group _____

Did you apply for Music in May last year? Y N

Have you ever attended Music in May? Y N

If yes, which year(s)? _____

Years experience on this instrument/voice _____

Years of private study _____

Private teacher's name _____

Recently performed solo _____

Composer _____

Please list any musical honors you have received on the back of this sheet.

Applicant please read carefully and sign:

I understand that *Music in May* will be **May 21 thru 23, 2020** and that the total cost is \$295. If I am accepted, I will pay the fee with my registration, make attendance at *Music in May* **my first priority**, and I will prepare the music prior to the festival.

Student signature _____ Date _____

TO BE COMPLETED BY STUDENT'S SCHOOL MUSIC ENSEMBLE *DIRECTOR*

1) Please evaluate this student in the following areas.
10 = superior, 5 = average, etc.

Musical ability 10 9 8 7 6 5 4 3 2 1

Solo skills 10 9 8 7 6 5 4 3 2 1

Cooperation/character 10 9 8 7 6 5 4 3 2 1

"Recognition" factor 10 9 8 7 6 5 4 3 2 1
(how deserving is this student of *Music in May* as a reward/motivator)

2) Please rank this student against your other students who have applied for **the same ensemble** in the order that you would like them to be considered. (1st, 2nd, etc.)

Rank _____ out of _____

3) Please include any other pertinent information or comments on the back of this sheet. Recommendations for instrumental seating will be considered.

4) Director's Signature _____

Date _____

PLEASE PRINT:

Director's Name _____

School Name _____

School Address _____

City, State, Zip _____

School Phone () _____

School FAX () _____

Director's Email Address _____

Deadline: This application must be COMPLETED and POSTMARKED by
Friday, February 14, 2020 in order to be considered.
Music in May
2043 College Way | Forest Grove, OR 97116
PHONE 503-352-2198 | FAX 503-352-2910
mim@pacificu.edu | pacificu.edu/mim

APPLICATION FORM

Please return to Music in May, c/o Pacific University, 2043 College Way, Forest Grove, OR 97116.