## ETSU Chamber Orchestras Teacher Recommendation Form

Student's Full Name					
, ,		U Chamber Orchestras. I understand that the			
ETSU Music department is providing an opportunity for the student to participate in a chamber music					
- · · · · · · · · · · · · · · · · · · ·	trict ethical po	plicies and will not interfere with the current			
private instruction of the student.  Please complete the survey to the best of your knowledge. If you have questions or comments, please contact Dr. David Kovac (kovacd@etsu.edu) Please email this form in to kovacd@etsu.edu  Recent Chamber Music experience:					
			Recent Orchestra experience:		
			Current Solo Repertoire:		
			The section below should be completed by	/ a private tea	cher
Please rate the student using the scale	1= poor	Comments			
provided. For responses of 2 or lower, please	3= average				
comment.	5= excellent				
Attitude, Attendance, Punctuality					
Music Reading and Sight-reading skills					
Preparation					
eadership Potential					
Maturity					
Overall impression of candidate: (please ci	rcle one)				
Highly recommend Recommend	Recommend	with reservation Do not recommend			
Teacher's Name	Teacher's Email				
Signature	Da	ate			