

Andrews University Department of Music Applied Music Examination - Keyboard

Name: Last First ID #

Class Standing: Choose One Degree: Choose One Term: Choose One

Current Private Lesson Course No: MUPF Credits: Principal Instrument/Area: Choose One

Instructor: Choose One

Date of AME: Time of AME: _____
Applied Music Teacher's Signature

I am applying for Upper Division Status:

Compositions to be performed for this Examination:

List complete names of pieces (including catalogue number and tempo when appropriate) and composer. Write an X as it applies in the three columns on the right.

Name of Piece and Composer:	Memory	Recital	Master Class

List other pieces and technical exercises studied during the course of the present semester.

Name of Piece and Composer:	Memory	Recital	Master Class

EVALUATION:

5. Excellent 4. Very Good 3. Proficient 2. Developing 1. Initial

Areas Evaluated	5	4	3	2	1
1. Tone Quality					
2. Musicality					
3. Technique					
4. Memorization					
5. Sight Reading					
TOTAL SCORE					

OVERALL LETTER GRADE

EVALUATOR SIGNATURE

TEACHER COMMENTS