

Tennessee Tech University

Scholarship / Music

MUSIC MAJOR DEPARTMENTAL REFERENCE FORM

Part I (to be completed by student)

Name: _____
(Last) (First) (Middle)

Address: _____

City: _____ State: _____ Zip: _____ Telephone: (____) _____ - _____ Email: _____

Instrument Type or Voice: _____ TTU Audition Date: _____

By signing below, the applicant agrees to waive all rights to read this recommendation.

_____ Date: ___ / ___ / ___

Part II (to be completed by a music specialist familiar with the applicant's musical skills)

1. How long and in what capacity have you known the applicant? _____

2. Please rank the applicant in comparison to your current students.

	Upper 5%	Upper 10%	Upper 25%	Upper 50%	Below 50%	Not Applicable
Musical Achievement	_____	_____	_____	_____	_____	_____
Interpretive Ability	_____	_____	_____	_____	_____	_____
Musical Accuracy and Facility	_____	_____	_____	_____	_____	_____
Intellectual Capability	_____	_____	_____	_____	_____	_____
Personal Integrity, Cooperation, and Reliability	_____	_____	_____	_____	_____	_____
Work Ethic	_____	_____	_____	_____	_____	_____
Motivation	_____	_____	_____	_____	_____	_____
Relative Maturity for his/her age	_____	_____	_____	_____	_____	_____

Rank this applicant among all students who have studied with you.

3. Please comment on the applicant's potential for success in his/her chosen major. _____

4. Please add any information to assist us in assessing the applicant's potential as a music student. _____

Recommending Music Specialist

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Telephone: (____) ____ - _____ Email: _____

Signature: _____ Date: ____ / ____ / ____

Send recommendation form to

Department of Music and Art
Application Processing
Tennessee Technological University
Box 5045
Cookeville, TN 38505-0001