

Master Class or Recital Scheduling Form

ALL SCHEDULING, APPROVALS, AND PROGRAM INFORMATION MUST BE SUBMITTED NO LATER THAN **THREE (3) WEEKS PRIOR TO THE PERFORMANCE DATE.**

Today's Date: \_\_\_\_\_

Responsible Party: \_\_\_\_\_ Phone: \_\_\_\_\_

Level (Check One): Undergraduate Graduate Faculty Guest Artist Required for Degree? Yes No

Performance Duration (Check One): Half (30 min) Full (60 min)

Instrument (if applicable): \_\_\_\_\_

Ensemble (if applicable): \_\_\_\_\_

Performance location (e.g. Concert Hall, Recital Hall, etc.): \_\_\_\_\_

Performance Date: \_\_\_\_\_

Performance Time (Check One) 3:00 PM (Sat/Sun Only) 4:30 (Sat/Sun Only) 6:00 (Sun-Fri) 7:30 (Sun-Fri)

Duration of program (approx. length in minutes incl. breaks and/or intermission): \_\_\_\_\_

Rehearsal Date(s): \_\_\_\_\_ Rehearsal time(s): (Begin) \_\_\_\_\_ (End): \_\_\_\_\_  
\_\_\_\_\_

Performers (s): \_\_\_\_\_  
\_\_\_\_\_

Accompanist: \_\_\_\_\_  
(Any piano GA must be approved by piano division signature below.)

Ushers: \_\_\_\_\_

Stage/equipment requirements (choice of piano, music stands, etc.): \_\_\_\_\_  
\_\_\_\_\_

**\$45.00 RECITAL FEE** MUST ACCOMPANY THIS FORM.....Paid \_\_\_\_\_

**\$50.00 DEPOSIT** MUST ACCOMPANY THIS FORM **IF THE PREP KITCHEN IS NEEDED**.....Paid \_\_\_\_\_

REQUESTED \_\_\_\_\_ NOT REQUESTED \_\_\_\_\_

Approvals: ALL SIGNATURES AND TYPED PROGRAM **MUST** BE TURNED IN TO THE MUSIC OFFICE **NO LATER THAN 3 WEEKS PRIOR** TO EVENT DATE.

Jury Committee: \_\_\_\_\_  
Signature/Date Signature/Date Signature/Date

Piano Division Approval of Accompanist: \_\_\_\_\_  
Signature Date

Departmental Calendar Approval: \_\_\_\_\_  
Signature Date

CC: Faculty \_\_\_\_\_ Performer \_\_\_\_\_ Calendar \_\_\_\_\_ Usher \_\_\_\_\_ Stage Manager \_\_\_\_\_ Recording \_\_\_\_\_