

## Indiana Wesleyan University Division of Music

**Applicant: please fill in the information below & give this form to your ensemble director/private teacher to complete as their recommendation.** Return to [lori.nevil@indwes.edu](mailto:lori.nevil@indwes.edu) or mail to Indiana Wesleyan University Division of Music, 4201 S. Washington Str., Marion, IN 46953.

Name \_\_\_\_\_  
Last
First
Middle

Home Address: \_\_\_\_\_  
Street
City
State
Zip Code

Desired Major:    \_\_\_ Music Education    \_\_\_ Applied Music    \_\_\_ Performance  
 \_\_\_ Music Therapy    \_\_\_ Songwriting    \_\_\_ Worship Studies/Music Ministry  
    \_\_\_ Composition

**Music Teacher: The above student has applied for admission to the Division of Music at Indiana Wesleyan University. Your candid assessment of this student’s development and potential will be very helpful to the admission committee as it makes its decision.**

How long have you taught the applicant (years)?    1 or less    2    3    4    5    6 or more

In what capacity have you taught the applicant?    \_\_\_ Ensemble Director    \_\_\_ Private Teacher    \_\_\_ other  
(please specify)

Please evaluate the applicant in terms of skill in the following (1=below average, 5 = excellent)

	1	2	3	4	5	No basis for judgement
1. Capacity for musical achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Artistry in performance, creative imagination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Accuracy and facility in performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Sense of relative pitch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Sense of rhythm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Ability to learn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Potential as a performer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Potential as a teacher of music	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Leadership skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. This rating is based on the student’s performance on _____ in _____ <span style="margin-left: 300px;">(Instrument/voice)</span> <span style="margin-left: 50px;">(lessons, band, orchestra, chorus, etc.)</span>						

**Please take a moment to provide a written recommendation of the applicant.**

Date \_\_\_\_\_ Signature \_\_\_\_\_ Title \_\_\_\_\_