

Music Major Recital Performance Form

Please fill out the following information 1 week prior to the Music Major Recital and email it to Sbobbitt@csusb.edu.

Name:		
Email:	Student ID:	
Instrument or Voice:		
Additional Performers Name(s): Provide first name, last name, instrument, voice or cond	lucting part, or attach a word doc or PDF with the inform	mation.
Title of Composition:		
Specific Names of Movements:		
Composer and Dates:	(-)
Performance Duration is:	Minutes (Please be as accurate as possible.)	
Instructor:		
Accompanist		
Required Signatures		

Instructors E-Signature or Signature:

Accompanist E-Signature or Signature:

Please email this completed form and any attachments to <u>Sbobbitt@csusb.edu</u>, or leave a signed hard copy and the attachments with the ASC in PA 111, 1 week prior to the performance.

PRINT