

UNIVERSITY HIGH SCHOOL

Music Teacher Evaluation Form (Confidential)

TO THE STUDENT APPLICANT:

Please fill-out the top of this evaluation form and give it to your music teacher for completion.

Student Name: _____ **Instrument or Voice:** (please specify type) _____

We give our permission for the music teacher to provide a confidential evaluation of this student's musical achievement.

Parent's Signature: _____ **Date:** _____

TO THE MUSIC TEACHER:

Time student has been studying under you: _____ **and/or** _____ How do you know the student? _____
(Years) (Months) (private teacher, school director, church, etc.)

Please indicate this student's musical proficiency in each of the following categories on a scale of 1 to 5 when compared to typical 8th grade music students you have taught.

- 1 (Beginner)** Student knows only the beginning musical skills to perform on their instrument or voice type.
- 2 (Intermediate)** Student has a range of playing at least one octave and can perform a few major scales.
- 3 (Average)** Student understands and can perform grade appropriate level music with success. This student can successfully read rhythms including quarter notes, eighth notes, and sixteenth notes.
- 4 (Skilled)** Student outperforms other 8th graders in an ensemble setting and has the skills needed to perform solo work.
- 5 (Advanced)** Student completely understands their instrument or voice. Student can perform all major scales and frequently performs solo materials at an advanced level. This student most likely has achieved individual accolades at festivals, performances, or awards ceremony.

	Beginner	Intermediate	Average	Skilled	Advanced
Overall Performance Ability	1	2	3	4	5
Tone and Intonation	1	2	3	4	5
Diagnosis of Personal Performance Errors	1	2	3	4	5
Basic Musicianship Skills (e.g. Scales, Arpeggios)	1	2	3	4	5
Sight Reading Ability	1	2	3	4	5
Aural Recognition of Intervals and Pitches	1	2	3	4	5
Aural Recognition / Performance of Rhythms	1	2	3	4	5
Knowledge of Musical Symbols and Terms	1	2	3	4	5
Practice Diligence	1	2	3	4	5

Additional Comments: _____

Teacher's Name (please print): _____ **Phone:** _____

Teacher's Address: _____
(or attach business card)

Teacher's Email: _____

Teacher's Signature: _____ **Date:** _____

Please return this completed evaluation form to the student in a sealed envelope;

Or, mail directly to:
UNIVERSITY HIGH SCHOOL
 2611 E Matoian Way, M/S UH 134
 Fresno, CA 93740-8010.