



RECITAL PROGRAM - HONOURS

Name: _____ ID: _____	
Teacher: _____	Instrument/voice: _____
Accompanist/associate artist/s: _____	

<p>PROGRAM</p> <p><input type="checkbox"/> Honours - Jazz</p> <p><input type="checkbox"/> Honours – Classical Performance</p> <p><input type="checkbox"/> Honours – Classical Voice</p>	<p>RECITAL DURATION</p> <p><input type="checkbox"/> 25 minutes</p> <p><input type="checkbox"/> 50 minutes</p> <p>Submit one form per recital</p>
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RECITAL PROGRAM DETAILS (if space insufficient, please attach a separate sheet):

Composer	Work	Duration
Total duration:		

Student signature: _____	Date: _____
Teacher signature: _____	Date: _____
Head: _____	Date: _____

PLEASE SUBMIT THIS FORM TO YOUR TEACHER