

# Hayes School of Music

APPALACHIAN STATE UNIVERSITY®

Office Use Only Date Received _____ Ref Code _____
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## Student Recital Hearing Form

**Students: Please Complete Section I of the form then send it your Applied Faculty Instructor**

**Faculty: Please complete Section II and send the form to Sally Booker for routing**

<p><b>Section I</b></p> <p>Click radio button to restart section 1</p>	<p>Name: _____ Banner ID: _____ Recital Date: _____ Recital Time: _____</p> <p>Applied Faculty Instructor: _____ Hearing Panel Member #2: _____ Hearing Panel Member #3: (recommended) _____ Faculty Advisor's email address: _____</p> <p>Student Signature: _____ Date: _____</p>
<p><b>Section II</b></p> <p>Click radio button to restart section 2</p>	<p>Recital Hearing Result <input type="checkbox"/> Pass    Fail                  Recital is <input type="checkbox"/> Postponed    <input type="checkbox"/> Proceeding as scheduled</p> <p>If Fail- please provide any details that are necessary for course or degree related situations: (Do NOT include HIPAA protected information)</p> <p>If postponed or canceled, please provide information here as to why:</p> <p>Additional Panel Comments here, if any:</p> <p>Faculty Signature: _____ Date: _____</p>

Routing Path: Student → Applied Faculty → Sally Booker → Zach, Kelsey, Bobby, Advisor, Soo