Student Recital Date Request Form

STEP 1: Completely & legibly fill in all required information below.

STUDENT: _________________________________________________________________

TELEPHONE #: ___________________________________________________________

E-MAIL ADDRESS ___________________________________________________________________

TYPE OF RECITAL: DMA______ MM_______ SR______ JR_______ Non-Degree________

INSTRUMENT: __________________________________________________________________

PROFESSOR: __________________________________________________________________

STEP 2: Check the SoM Calendars online at http://www.ou.edu/content/finearts/music/student-resources.html to find 3 dates that will work with both you and your professor. Most degree recitals take place in Pitman Recital Hall. DMA and MM students, SR percussionists and composers (if equipment requirements exceed Pitman’s capacity) and SR pianists may request Sharp Concert Hall and requests will be reviewed on a case-by-case basis. Gothic Hall is reserved for organ recitals only. Non-Degree recitals must take place in the Choir Room - CMC128.

Preferred Dates:                Circle                Check One

1\textsuperscript{st} Choice: (Date)__________ 2PM - 4PM - 6PM - 8PM PRH___SCH___GH___128___

2\textsuperscript{nd} Choice: (Date)__________ 2PM - 4PM - 6PM - 8PM PRH___SCH___GH___128___

3\textsuperscript{rd} Choice: (Date)__________ 2PM - 4PM - 6PM - 8PM PRH___SCH___GH___128___

STEP 3: Read and Understand the Following;

The above dates must be cleared with your professor BEFORE a date will be scheduled on the calendar. All dates must be scheduled with the Hall Manager, Steven Eiler rm 105C in person…DO NOT simply drop off this form and expect your recital to be scheduled. Cancellations will only be granted by submitting the proper form to the Hall Manager with your professor’s permission and signature on the Cancellation Form. Cancellation Forms are located in the main office, rm - 138. A $75 cancellation fee will be charged to your bursars account if the cancellation is less than one month to the date of your original recital date.

Professors: By signing below you acknowledge that your student has discussed the above dates listed on this form and are suitable for this student’s recital.

Please sign below.

_________________________              __________________________
Professor                                    date                      Student                                              date

_________________________
Concert Hall Manager              date

All signatures are required to finalize recital date.