

Graduate Artist Certificate in Performance

Recital Application Form

Before filling out this form, you must go to www.music.unt.edu/roomview to reserve your date/time.

This applies to on-campus and off-campus recitals.

Electronically submit one copy of this completed application form to graduaterecitals@unt.edu or in the Graduate Studies Office, Chilton Hall 211, no later than three weeks prior to the proposed performance date

Name: _____ Instrument/Voice: _____
 UNT ID#: _____ Email: _____
 Phone: _____

Recital: MUGC 5941 MUGC 5942 MUGC 5943 MUGC 5944
 MUGC 6941 MUGC 6942 MUGC 6943 MUGC 6944

Proposed performance date _____ Time: _____ Place: _____
 Assisting performer(s): _____

Total duration of musical selection(s): _____ minutes

Attach your program listing composer, composition title, date of composition, and duration for each work.

If you are submitting via email, this will need to be a separately attached document.

In addition, you must submit a complete program to Linda.Strube@unt.edu in the Concert Program Office (MU 241)

Major Professor: “I have advised the student in the preparation of this program and endorse it. I agree to attend this recital and to serve as juror.”

 Type here Signature

Area Faculty Member: “I agree to attend this GAC recital and serve as a juror for the area.”

 Type here Signature

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 Type here Signature

GACMP Chair’s Approval: _____