PART SEVEN (VII):
FORMS REQUIRED FOR VARIOUS PROCEDURES

WASHINGTON STATE UNIVERSITY
SCHOOL OF MUSIC

POLICIES AND PROCEDURES
PART VII - FORMS REQUIRED FOR VARIOUS PROCEDURES

The following pages are sample forms required for certain procedures. You are urged to become familiar with those forms that pertain to you and/or your area.
APPLICATION TO PERFORM ON FULL CONVOCATION

PLEASE TYPE OR WRITE LEGIBLY. FORM MUST BE FILLED OUT COMPLETELY AND LEGIBLY BEFORE IT WILL BE ACCEPTED BY THE MUSIC PROGRAM OFFICE PERSONNEL.

Date of Performance __________________________

Student's Name(s) ____________________________________________ Composer(s) FULL name

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Movements: 1. ___________________________ 3. ___________________________
2. ___________________________ 4. ___________________________

Performer(s) and Instrument(s) or voice range

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Accompanist
GIVE EXACT LENGTH OF PERFORMANCE TIME --- NOT TO EXCEED 8 MINUTES

X ___________________________ ___________________________
(Faculty Signature) Length of Performance Time

Faculty signature on this form will indicate to the Music Program Office personnel that the information above is complete and correct.

******************** FILL OUT ALL INFORMATION BELOW *******************

Student's Name ___________________________ Performance Date __________

Check what is needed for equipment set-up and indicate how many of the following:

Piano _____ Full stick _____ Short stick _____ No stick _____

Chairs _____ Harpsichord _____ (Need prior approval)

Music Stands _____ Organ _____ Velvet Curtain Open/Closed (only available in Bryan)
RECITAL DATE SELECTION FORM

This form is to be submitted to the Music Facilities Coordinator after agreeing with both your studio teacher and fellow performers on possible dates/times for the recital. Most recital dates are assigned in the spring prior to the academic year in which the recital will take place. If you need to schedule a required recital during the academic year, please contact the Facilities Coordinator directly for available dates.

NAME OF PERFORMER(S) __________________________ PHONE __________

E-MAIL ADDRESS __________________________ INST/VOICE __________

TYPE OF RECITAL (See Music Policies and Procedures Handbook for recital guidelines):
FULL RECITAL _________  HALF RECITAL _________  JOINT RECITAL _________

VENUE REQUESTED:
BRYAN HALL THEATRE ____  KIMBROUGH CONCERT HALL____
KIMBROUGH LECTURE HALL (101) ____  KIMBROUGH 115 _____

DATES/TIMES ON WHICH RECITAL COULD BE HELD:

1. FIRST CHOICE: DATE _______________ TIME ______________________
2. SECOND CHOICE: DATE _______________ TIME ______________________
3. THIRD CHOICE: DATE _______________ TIME ______________________

REQUIRED SIGNATURES:

1. ACCOMPANISTS AND OTHER PERFORMERS
   ___________________________ DATE ______
   ___________________________ DATE ______
   ___________________________ DATE ______

2. STUDIO TEACHER(S)
   ___________________________ DATE ______
   ___________________________ DATE ______

******************** FACILITIES COORDINATOR USE ONLY *********************
DATE SELECTED ___________________ ROOM SCHEDULED ________________
FACILITIES COORDINATOR______________ DATE ______________________
Route: SC ___ DJ ___ Administrative Manager_____
CONCERT PROGRAM INFORMATION for
________ print name of concert here____________

Remember to list the date, time and location of your performance on the program
Please list the program below is assist stage crew preparation. Indicate under each piece who is performing.

<table>
<thead>
<tr>
<th>TITLE OF WORK (opus no, key, listing etc)</th>
<th>COMPOSER (first and last name)</th>
<th>TIMING</th>
</tr>
</thead>
</table>

☐ Please check here if you have made arrangements for this concert to be recorded. Recording Personnel:__________

CONCERT RECORDINGS: All programs must state at the end of the program listing: *Any recording and/or reproduction of the whole or any portion of the performance is permitted only with approval of the WSU School of Music*. You may also include: *Please refrain from the taking of photographs and turn off all cell phones and pagers for the duration of the performance.*

The Music Program will assume the responsibility for the cost of archival recording for all performances by School of Music Faculty and Ensembles.

Student Recitals may be recorded at the individual’s expense. Individuals and small groups wishing to have concerts recorded shall make their own arrangements with the recording personnel. Performances in Bryan Hall Theatre or Kimbrough Concert Hall may be DAT recorded (please see Sandra Carlson for a list of trained personnel) or through the Recording Studio (recording request packets are available in Kimbrough 260). Concerts occurring in Kimbrough 115 or 101, or off-campus should request recordings through the Recording Studio. Permission to make such recordings is granted by the Director (Gerald Berthiaume) on the condition that the recording personnel are listed on this form.
SET UP BRYAN HALL THEATRE
## SET UP FOR KIMBROUGH CONCERT HALL

**Name of Piece:** ___________ for (concert) ________

<table>
<thead>
<tr>
<th>Item</th>
<th>OPEN/CLOSED</th>
<th>QUANTITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main Curtain</td>
<td></td>
<td>White Plastic Chairs</td>
</tr>
<tr>
<td>Mid Stage Traveler (crimson)</td>
<td></td>
<td>Black Plastic</td>
</tr>
<tr>
<td>Up Stage Traveler (black)</td>
<td></td>
<td>Musician's Chairs (75)</td>
</tr>
<tr>
<td>Pit Filler</td>
<td>UP/DOWN</td>
<td>Black Upholstered</td>
</tr>
<tr>
<td>Elevator Lift</td>
<td>YES/NO</td>
<td>Musician's Chairs (10)</td>
</tr>
<tr>
<td>Cyc</td>
<td></td>
<td>Black Upholstered</td>
</tr>
<tr>
<td>Scrim</td>
<td></td>
<td>Musician's Chairs (10)</td>
</tr>
<tr>
<td>Acoustical Shells</td>
<td></td>
<td>Platforms 4&quot;W x 8&quot;D x 8&quot;H</td>
</tr>
<tr>
<td>Conductor's Podium</td>
<td></td>
<td>Platforms 4&quot;W x 8&quot;D x 16&quot;H</td>
</tr>
<tr>
<td>Lectern</td>
<td></td>
<td>Tables in Lobby</td>
</tr>
<tr>
<td>Water Stand</td>
<td></td>
<td>w/crimson linens &amp; skirting</td>
</tr>
<tr>
<td><strong>Note:</strong> Please note sound needs or other special requests on the back of this page</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other keyboard:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Page Turner Chair</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>Name of Piece</th>
<th>OPEN/CLOSED</th>
<th>QUANTITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main Curtain (gold)</td>
<td></td>
<td>White Plastic Chairs</td>
</tr>
<tr>
<td>Mid Stage Traveler (gold)</td>
<td></td>
<td>Black Plastic</td>
</tr>
<tr>
<td>Up Stage Traveler (gold)</td>
<td></td>
<td>Musician's Chairs (10)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Musician's Chairs</td>
</tr>
<tr>
<td></td>
<td>UP/DOWN/LECTURE LEVEL</td>
<td></td>
</tr>
<tr>
<td>Elevator Lift</td>
<td>YES/NO</td>
<td>Black Upholstered (10)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Musician's Chairs</td>
</tr>
<tr>
<td>Acoustical Shells (5)</td>
<td></td>
<td>Music Stands</td>
</tr>
<tr>
<td>Conductor's Podium</td>
<td></td>
<td>Choral Risers</td>
</tr>
<tr>
<td>Lectern</td>
<td></td>
<td>Platforms 4’W x 8’D x 8”H</td>
</tr>
<tr>
<td>Water Stand</td>
<td></td>
<td>Platforms 4’W x 8’D x 16”H</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Tables in Lobby</td>
</tr>
<tr>
<td></td>
<td>NOTES, STICK PREF etc</td>
<td>w/crimson linens &amp; skirting</td>
</tr>
</tbody>
</table>

Please note sound needs or other special requests on the back of this page.
### INSTRUMENT CHECK-IN FORM

**NAME OF INSPECTOR** ___________________________ **DATE** ________________

#### CONDITION OF INSTRUMENT

<table>
<thead>
<tr>
<th>CASE #</th>
<th>VALUE</th>
</tr>
</thead>
<tbody>
<tr>
<td>INSTRUMENT</td>
<td></td>
</tr>
<tr>
<td>WSU #</td>
<td></td>
</tr>
<tr>
<td>SERIAL #</td>
<td></td>
</tr>
</tbody>
</table>

**CASE CONTENTS OTHER THAN INSTRUMENT:** (swab, extra slides, etc.)

- __________________
- __________________
- __________________

**DESCRIPTION:** (scratches, dents, tarnish, condition of case, etc.)

---

**IN YOUR OPINION, THIS INSTRUMENT SHOULD BE REPAIRED** (circle priority):

IMMEDIATELY  1  2  3  4  5  6  7  8  9  NOT CRITICAL

**COMMENTS:**

---

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WASHINGTON STATE UNIVERSITY  
SCHOOL OF MUSIC  

INSTRUMENT CHECK-OUT FORM  
SEMESTER BREAK AND SUMMER USAGE  

| NAME _______________________________ | ID# ___________________________ |
| ADDRESS ___________________________ | PHONE ___________________________ |

| INSTRUMENT ___________________________ | VALUE ___________________________ |

| CASE # _______________________________ | INSURANCE POLICY INFORMATION |

| WSU # _______________________________ | Company _______________________________ |

| SERIAL # _______________________________ | Policy Number _______________________________ |

CASE CONTENTS OTHER THAN INSTRUMENT:  (swab, extra slides, etc.)  

| _______________________________ | _______________________________ | _______________________________ |

| _______________________________ | _______________________________ | _______________________________ |

DESCRIPTION:  (scratches, dents, tarnish, condition of case, etc.)  

| Studio Teacher _______________________________ | Date _______________________________ |

| Director or Designee _______________________________ | Date _______________________________ |

I agree to return this instrument prior to the first day of the next registration period after break or summer.  

| Student Signature _______________________________ | Date _______________________________ |

| Office use:  User fee paid _______________________________ | Date _______________________________ |
WASHINGTON STATE UNIVERSITY
SCHOOL OF MUSIC

PIANO MAINTENANCE REQUEST

This form is to be submitted to Dave Severance (mailbox is located in the Music Office Mail Room in Kimbrough 260B) in case of any problems with pianos.

LOCATION OF PIANO:
Building ___________________________ Room: ___________________________

DESCRIPTION OF PIANO:
Make (i.e. Steinway): ______________________ Color: ______________________

Type (i.e. upright, grand): _____________________________________________

DESCRIPTION OF PROBLEM (Please be specific, giving exact location on keyboard is applicable):

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

PERSON REPORTING PROBLEM: NAME: ____________________________

PHONE: ____________________________

*************************************************************************
WASHINGTON STATE UNIVERSITY
SCHOOL OF MUSIC

REPERTOIRE SHEET

NAME_________________________ SEM/YEAR _____ DATE __________________

MUSIC DBLE MUSIC EDUCATION NON-
MAJOR ___ MAJOR ___ MINOR ___ ENDORSEMENT ___ MAJOR ___

STUDENT IS A: FRESHMAN SOPHOMORE JUNIOR SENIOR 5TH YR. GRAD

PERFORMANCE AREA ___________ COURSE NO. _______ CREDITS _______

TOTAL CREDITS EARNED IN THIS AREA PRIOR TO CURRENT SEMESTER ___________

_____________________________ DATE _________________________
Signature of Performance Studies Teacher

COMPOSER

TITLE-include opus or catalogue no.

STUDIES, ETUDES, TECHNICAL MATERIAL