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. 2. Performer(s) and Instrument(s) or voice range	3. 4. ge
Accompanist	
GIVE EXACT LENGTH OF PERFORMANCE X	-
(Faculty Signature)	cate to the Music Program Office personnel that the
****** FILL OUT AL	L 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 pri	ior approval)
Music Stands Organ Velvet 0	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.

NAM	E OF PERFORMER(S	5)	PHONE
E-MA	IL ADDRESS		INST/VOICE
TYPE	OF RECITAL (See M	lusic Policies and Procedures	Handbook for recital guidelines): JOINT RECITAL
BRYA	JE REQUESTED: AN HALL THEATRE _ ROUGH LECTURE H	KIMBROUGH CONCER ALL (101) KIMBROU	T HALL GH 115
DATE	S/TIMES ON WHICH	RECITAL COULD BE HELD	:
1.	FIRST CHOICE:	DATE	_ TIME
2.	SECOND CHOICE:	DATE	TIME
3.	THIRD CHOICE:	DATE	TIME
REQI	JIRED SIGNATURES	:	
1.	ACCOMPANISTS AI	ND	DATE
	OTHER PERFORME		DATE
			DATE
2.	STUDIO TEACHER(S)	DATE
			DATE
DATE FACII	E SELECTED LITIES COORDINATO	COORDINATOR USE ONLY ROOM S	
Route	e: SC DJ <i>i</i>	Administrative Manager	_

CONCERT PROGRAM INFORMATION for

prin	t name of	concert	here

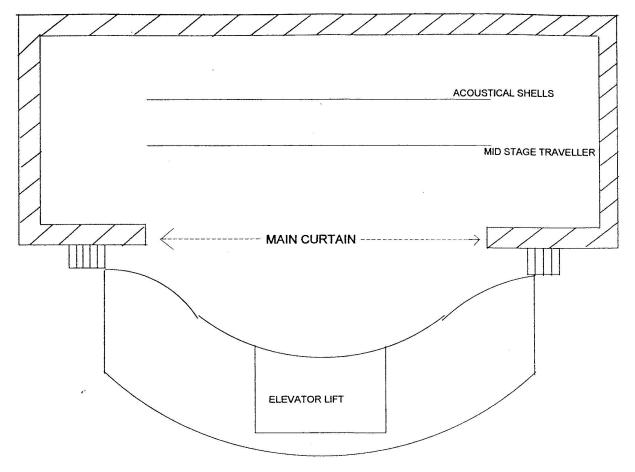
Remember to list the date, time and location of your performance on the program Please list the program below is assist stage crew preparation. Indicate under each piece who is performing.

TITLE OF WORK (opus no, key, listing etc)	COMPOSER (first and last name)	TIMING
	1	1
Please check here if you have made arrangements for t	his concert to be recorded. Recording	

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.

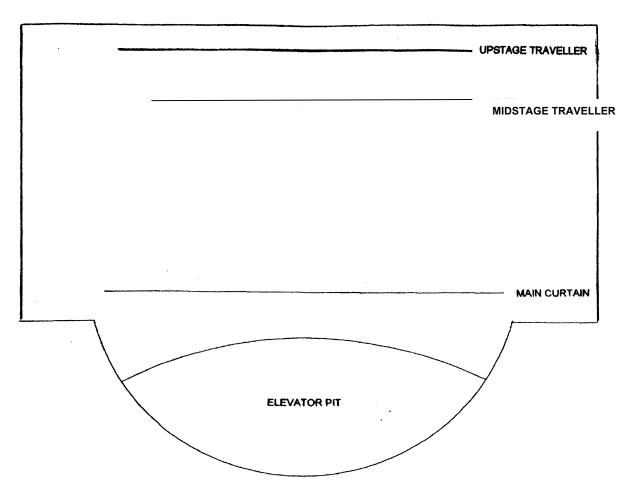
SET UP BRYAN HALL THEATRE



Name of Piece:	for (concert)
1441116 01 1 1666.	101 (00110011)

	OPEN/CLOSED		QUANTITY
Main Curtain		White Plastic Chairs	
Mid Stage Traveler (crimson)		Black Plastic	
Up Stage Traveler (black)		Musician's Chairs (75)	
	UP/DOWN	Black Upholstered	
Pit Filler		Musician's Chairs (10)	
Elevator Lift		Music Stands	
	YES/NO	Choral Risers	
Сус		Platforms 4'W x 8'D x 8"H	
Scrim		Platforms 4'W x 8'D x 16"H	
Acoustical Shells		Tables in Lobby	
Conductor's Podium		w/crimson linens & skirting	
Lectern			NOTES, STICK PR
Water Stand		Baldwin Piano	
		Schantz Pipe Organ	
Please note sound needs or	other special	Other keyboard:	
requests on the back of this	page	Page Turner Chair	

SET UP FOR KIMBROUGH CONCERT HALL



Name of Piece ______for (concert) _____

	OPEN/CLOSED		QUANTITY
Main Curtain (gold)		White Plastic Chairs	
Mid Stage			
Traveler (gold) Up Stage			
Traveler (gold)		Black Plastic	
	UP/DOWN/LECTURE LEVEL	Musician's Chairs (10)	
Elevator Lift		Black Upholstered (10)	
	YES/NO	Musician's Chairs	
Acoustical Shells (5)		Music Stands	
Conductor's Podium		Choral Risers	
Lectern		Platforms 4'W x 8'D x 8"H	
Water Stand		Platforms 4'W x 8'D x 16"H	
	NOTES, STICK PREF etc	Tables in Lobby	
Fazioli Piano		w/crimson linens & skirting	
Steinway Piano			
Other keyboard:		Please note sound needs or other spe	ecial
Page Turner Chair		requests on the back of this page	

INSTRUMENT CHECK-IN FORM

NAME OF INSPECTOR	DATE		
CONDITION OF INSTRUMENT			
CASE #	VALUE		
INSTRUMENT	_		
WSU #	-		
SERIAL#	-		
CASE CONTENTS OTHER THAN INST	RUMENT: (swab, extra slides, etc.)		
DESCRIPTION: (scratches, dents, tarni	sh, condition of case, etc.)		
IN VOLID ODINION THIS INSTRUMENT	T SHOULD BE DEDAIDED (signle priority):		
IN YOUR OPINION, THIS INSTRUMEN	T SHOULD BE REPAIRED (circle priority):		
IMMEDIATELY 1 2 3 4 5 6 7 8 9 N	NOT CRITICAL		
COMMENTS:			

INSTRUMENT CHECK-OUT FORM SEMESTER BREAK AND SUMMER USAGE

NAME	ID#
ADDRESS	
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	
Studio Teacher	Date
Director or Designee	Date
I agree to return this instrument prior to the first day on summer.	of the next registration period after break or
Student Signature	Date
Office use: User fee paid	Date

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				
DESCRIPTION OF PIANO: Make (i.e. Steinway):				
Type (i.e. upright, grand):				
DESCRIPTION OF PROBLEM (Please applicable):	be specific, giving exact location on keyboard is			
PERSON REPORTING PROBLEM: NAM	IE:			
PHON	IE:			
***********	*********			

REPERTOIRE SHEET

NAME			SEM/YEAR	DATE	
			EDUCATION ENDORSEMENT _		
STUDENT IS	A: FRESHM	AN SOPHOM	IORE JUNIOR SEN	IIOR 5TH YE	R. GRAD
PERFORMAN	NCE AREA _		COURSE NO	D	_ CREDITS
TOTAL CREDITS EARNED IN THIS AREA PRIOR TO CURRENT SEMESTER					
			DAT	Ē	
Signature of Performance Studies Teacher					
COMPOSED					

COMPOSER

TITLE-include opus or catalogue no.

STUDIES, ETUDES, TECHNICAL MATERIAL