ACCOMPANYING REQUEST FORM
SIU School of Music

Turn in the completed form with ALL MUSIC to the Accompanying Coordinator, Dr. Kato. Requests will be handled according to priority level, and then in the order they are received. The SIU Accompanying and Recital Scheduling Policy Handbook apply to all assignments. Copies of handbooks are available at the Music Office (Altgeld 103) and online.

Name of Student_______________________________________ Phone # _____________________________
Email_________________________________ Lesson Day & Time ____________________________
Applied Teacher_____________________________ Instrument_____________________________

1. Event:       Full Degree Recital _____ MM./Sr./Jr. (circle one)
                 Partial Degree Recital _____ MM./Sr./Jr. (circle one)
                 Semester Jury _____ Level (circle one):  040  140  240  340  440  540
                 Studio Recital _____ Concerto Competition _____
                 Convocation _____ Upper Divisional Jury _____

2. Event Location: __________________________

3. Event Date and Time: ______________________________

4. Repertoire (Continue on back of sheet if needed.) Scores must be provided with this form.

Title (Specific movements must be listed. Please print clearly) ______________ Composer ______________

I have filled out this form completely, and I agree to comply with the School of Music Accompanying and Recital Scheduling Policy Handbook.

Student Signature_________________________________________ Date_______________

I approve this student’s readiness level, chosen repertoire, and scheduled events specified above.

Applied Instructor Signature_____________________________ Date_______________