

RECOMMENDATION FORM FOR BAUER FAMILY HIGH SCHOOL VOICE STUDIO

Please note: Recommendations will remain confidential and will not be viewed by anyone outside of the audition committee.

Please email this completed form and an optional letter of recommendation to <u>HSVoice@houstongrandopera.org</u> by March 18, 2024.

Date

Name of Applicant Who You are Recommending

Name of Recommender

Position

Organization or Institution

Email (for follow up if necessary)

Phone (for follow up if necessary)

For how long have you known the applicant and in what capacity?

1. Rank the applicant's musicianship skills:

____ Extraordinary ____Excellent ____ Good ____ Needs Work ____ Not able to assess this quality

Briefly explain your ranking:

2. Rank the applicant's vocal potential:

____Extraordinary ___Excellent ___ Good ___ Needs Work ___ Not able to assess this quality

Briefly explain your ranking:

3. Rank the applicant's demonstrated commitment to studying music and vocal performance:

____ Extraordinary ____Excellent ____ Good ____ Needs Work ____ Not able to assess this quality

Briefly explain your ranking:

4. Rank the applicant's potential to study vocal performance at the college, university or conservatory level:
____ Extraordinary ____Excellent ____ Good ____ Needs Work ____ Not able to assess this quality
Briefly explain your ranking:

5. Rank the applicant's level of maturity and ability to get along with others:

___ Extraordinary ___Excellent ___ Good ___ Needs Work ___ Not able to assess this quality

Briefly explain your ranking:

6. Rank the applicant's level of scholastic achievement:

____ Extraordinary ___Excellent ___ Good ___ Needs Work ___ Not able to assess this quality

Briefly explain your ranking:

7. Rank the applicant's work ethic:

____ Extraordinary ___Excellent ___ Good ___ Needs Work ___ Not able to assess this quality

Briefly explain your ranking:

8. Rank the applicant's family or network of support (i.e. Is/Are parent(s) or guardian(s) understanding or supportive of the applicant's goals?):

___ Extraordinary ___Excellent ___ Good ___ Needs Work ___ Not able to assess this quality

Briefly explain your ranking:

9. Complete the following statement: The applicant ranks among the:

____ Top 3% ____ Top 10% ____ Top 25% ____ Top 50% ____ Other

percent of students with whom I've taught/worked over the last _____ years.

You are encouraged to include a statement about your work with or observation of the applicant here (200 words or less).

Thank you for taking the time to submit the recommendation. Your insight will greatly assist us in our decision-making process. Please email completed form to HSvoice@hgo.org.