Master of Music in Vocal Performance
Recommendation Form

Lives of Significance and Service

NORTH PARK UNIVERSITY CHICAGO

www.northpark.edu

North Park University
Rebecca Olthafer, Music Admission Counselor
3225 West Foster Avenue, Box 21
Chicago, Illinois 60625-4895
(773) 244-5623

To be completed by the applicant

Applicant Name: _____
Last *First* *M.I.* *Maiden*

Mailing Address: _____
Number *Street* *Apartment #*

_____
City *State* *Zip Code* *County*

I acknowledge that this reference is confidential and I waive my right to view it at a later date.

Signature: _____ Date: _____

To be completed by the recommender:

Please complete this form, sign a sealed envelope, and send to the student or directly to North Park University, Rebecca Olthafer, Music Admission Counselor, Box 21, 3225 West Foster Avenue, Chicago, IL 60625-4895

1. In what capacity do you know and have you worked with this applicant?

2. What are the applicant's particular strengths?

3. Comment on the applicant's level of mastery of vocal technique including such things as tonal quality, range, and flexibility.

4. Comment on the applicant's musicianship, interpretive ability, and stage presence.

5. Comment on the applicant's intellectual and communicative abilities.

6. Comment on the applicant's personal characteristics such as maturity, reliability and how he/she relates to others.

7. Comment on the applicant's level of motivation and self-discipline.

8. Please rate this applicant compared to all the other singers you have worked with of a similar age:

☐ Top 5% ☐ Top 10% ☐ Top 25% ☐ Other _____

9. Please assess the applicant's potential for success in a singer's career considering such aspects as solo/operatic work, ensemble work and teaching.

Additional Comments:

Signature: _____ Date: _____

Name (please print): _____

Position: _____

Phone number: (_____) _____

Address: _____

City, State, Zip Code: _____

Please return directly to:

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