

NORTH PARK UNIVERSITY – SCHOOL OF MUSIC

MUSIC MAJOR AUDITION REQUEST FORM

| APPLICANT INFORMATION | | | | | |
|---|---|--|--|----------------------------------|-----------------------------------|
| Last Name | First | M.I. | Date | | |
| Street Address | | Apartment/Unit # | | | |
| City | State | ZIP | | | |
| Cell Phone | E-mail Address | | | | |
| Primary Instrument: | Secondary Instrument: | Year to NPU: <input type="checkbox"/> Fall 2010 <input type="checkbox"/> Spring 2011 | | | |
| I am a: | <input type="checkbox"/> Transfer <input type="checkbox"/> First Year | | Will you audition on your secondary instrument? YES <input type="checkbox"/> NO <input type="checkbox"/> | | |
| Intended Music Major: | <input type="checkbox"/> (BA) Bachelor of Arts <input type="checkbox"/> (BMP) Bachelor of Music in Performance <input type="checkbox"/> (BMC) Bachelor of Music in Composition <input type="checkbox"/> (BMW) Bachelor of Music in Music in Worship <input type="checkbox"/> (BME) Bachelor of Music in Education <input type="checkbox"/> Choral <input type="checkbox"/> Instrumental | | | | |
| PREFERRED AUDITION DAY (STUDENTS MUST BE AVAILABLE THE ENTIRE DAY) | | | | | |
| Saturday, February 13, 2010 | AM <input type="checkbox"/> | PM <input type="checkbox"/> | | | |
| Saturday, February 27, 2010 | AM <input type="checkbox"/> | PM <input type="checkbox"/> | | | |
| Transfer Theory Diagnosis (mandatory) | 9 AM <input type="checkbox"/> | | <i>This test is for transfer students only.</i> | | |
| First Year Theory Diagnosis (mandatory) | | 3 PM <input type="checkbox"/> | <i>This test is for first year students only.</i> | | |
| Keyboard Placement (mandatory) | AM <input type="checkbox"/> | PM <input type="checkbox"/> | | | |
| Campus Tour (optional) | 11 AM <input type="checkbox"/> | 2 PM <input type="checkbox"/> | | | |
| Lunch @ 12pm (optional) | YES <input type="checkbox"/> | NO <input type="checkbox"/> | | | |
| Will you be bringing your own accompanist? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If not, will you need an accompanist? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| EDUCATION | | | | | |
| High School | Address | | | | |
| College | Address | | | | |
| Other | Address | | | | |
| REFERENCES | | | | | |
| <i>Please list two professional references who can speak about your musical and performance experience.</i> | | | | | |
| <u>Full Name</u> | | | | | Relationship |
| Address | | | | | Phone |
| <u>Full Name</u> | | | | | Relationship |
| Address | | | | | Phone |
| TRAINING AND EXPERIENCE | | | | | |
| Have you taken private lessons on your primary instrument? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If so, how long? | 0-2yrs. <input type="checkbox"/> | 3-5 yrs. <input type="checkbox"/> |
| Have you taken private lessons on your secondary instrument? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If so, how long? | 0-2yrs. <input type="checkbox"/> | 3-5 yrs. <input type="checkbox"/> |
| Have you performed as a soloist? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | | | |
| ACADEMICS | | | | | |
| ACT/SAT Score | Class Rank | _____ % | GPA | | |
| DISCLAIMER AND SIGNATURE | | | | | |
| I certify that my answers are true and complete to the best of my knowledge. | | | | | |
| Type Name/Signature | | | | | Date |
| Office Use Only | | | | | |
| <i>Essay, Resume, CD</i> | <i>Yes/No</i> | | | | <i>Date Rcvd</i> |
| <i>Audition Granted</i> | <i>Yes/No</i> | | | | <i>Date/Time</i> |
| <i>Accepted to SOM</i> | <i>Yes/No</i> | <i>Accepted to NPU</i> | <i>Yes/Pending</i> | | |
| <i>Award Recommended</i> | <i>Yes/No</i> | <i>Honors/Presidential</i> | <i>Amount \$</i> | <i>Rank</i> | <i>1 – 2 – 3 – 4 – 5</i> |

Please print and mail to North Park University, Attn: Rebecca Olthafer, 3225 W. Foster Ave., #21, Chicago, IL 60625 or fax to 773-279-7310. If you have submitted a form and do not receive a confirmation, please email rolthafer@northpark.edu or call 773-244-5623.