

Letter of Recommendation Form

 $Florida\ State\ University,\ College\ of\ Music\ Admissions,\ 122\ North\ Copeland\ Street,\ Tallahassee,\ Florida\ 32306-1180\ (850)\ 644-6102;\ musicadmissions@fsu.edu;\ www.music.fsu.edu$

| Part A to be completed by th | ne applicant : (Parts B and C to be complete | ted by the | person wri | ting the re | ference.) | | | |
|---|--|--------------|--------------|--|----------------------------------|--------------------------------------|------------|--|
| Full Name | | | | | | | | |
| Intended Degree of Study | y Instrument or Voice | | | | | | | |
| (Optional) I hereby waive what Educational Rights and Privac | atever rights of access I may have to this cory Act of 1974. | onfidential | recommen | dation as p | provided i | n the Famil | У | |
| Signature | Date | | | | | | | |
| Part B to be completed by th | ne person writing the reference (or attack | ı a letter (| of reference | œ): | | | | |
| Please inc | dicate where the applicant would rank among students currently or recently in your area. | Top 5% | Top 10% | Top 25% | Top 50% | Lower 50% | No Info | |
| Level of performing accompl | lishments | | | | | | | |
| Musical interpretative ability | | | | | | | | |
| Intellectual ability | | | | | | | | |
| Personal integrity/cooperation | | | | | | | | |
| Relative maturity (musical or | | | | | | | | |
| Potential for successes and/or | r motivation in applicant's chosen field | | | | | | | |
| In what capacity do you know In the space below, please feel | the applicant welcome to include any additional comme | | | | | | cessary). | |
| Signature | Date | Date | | | Please Return Completed Form to: | | | |
| Name (please print) | | | | College | | iversity c Admission 32306-118 | | |
| Present Position | Institution | | | Phone: 850.644.6102 Fax: 850.644.2033 | | | | |
| Phone | E-mail | | | E-mail | : musicad | lmissions@ | fsu.edu | |