



UNIVERSITY OF OREGON

School of Music and Dance

MarAbel B. Frohnmayer Music Building
961 E. 18th Ave. Eugene OR 97403-1225



GRADUATE RECITAL SCHEDULING FORM: I

Degree Recitals may be tentatively scheduled following these guidelines. **HOWEVER**, students will receive final confirmation of recital dates via email from the Calcium scheduling program.

For degree recitals: Fall termafter August 1st
Winter termafter mid-November
Spring term.....after Beginning of Winter term

Please see "Procedures and Policies for Music Graduate Students" regarding recital policies.

1. Secure possible recital dates from list posted near room 121G according to schedule listed above.
2. Complete both sides of this form and submit to Music Graduate Office, room 219K.
3. After approval of this form by the Music Graduate Office, you will receive notification of a selected recital date via Calcium scheduling program. Recital fee is paid at this time.
4. Recital date will be confirmed by scheduling office when the pre-recital hearing is successfully passed and an electronic copy of the final program, approved by the faculty committee, is submitted to the Graduate Office.

Requests will be processed in order of receipt.

Received: _____

Name: _____ Phone: _____ E-mail: _____

DATE OF REQUEST: _____ (For office use only: Date on hold Fee paid Confirmed)

TYPE OF RECITAL REQUESTED: (check one) Doctoral Master's

LIST FOUR PREFERRED DATES AND TIMES FOR YOUR RECITAL IN ORDER OF PREFERENCE:

| | Month | Day | Time | Concert Manager Initials |
|----|-------|-------|-------|--------------------------|
| 1. | _____ | _____ | _____ | |
| 2. | _____ | _____ | _____ | |
| 3. | _____ | _____ | _____ | |
| 4. | _____ | _____ | _____ | |

SPACE REQUESTED: (check one)

- Beall Concert Hall (degree recitals only)
- Other _____
(Graduate recitals off-campus require the Graduate Committee and Graduate Director's approval.)

Will not be accepted without Part II (see reverse)

REQUIRED SIGNATURES (if applicable):

Recording Engineer: _____
(Recitals are automatically scheduled for recording. Signature is required for additional electronic needs only.)

Harpichord/Organ: _____
(see Barbara Baird, room 162B)

(Revised 1/13/2011)



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Permission to Schedule Graduate Pre-Recital Hearing

Graduate Recital Scheduling Form: Part II

Note:



- Students must file this two-part form with the Graduate Office no later than **one week prior** to the jury audition.
- The Music Graduate Office will notify the student and the Facilities Manager in 121G when the committee and pre-recital hearing date are approved. An electronic copy of the final program, approved by the faculty committee, must be submitted to the Graduate Office after the pre-recital hearing is approved. It is important to remember that no recital date will be confirmed without this form **and a copy of the approved program.**
- **Students must report any changes** to the date or time for the Pre-Recital Hearing **or** Recital to the Music Graduate Office.
- The student and adviser are responsible for reserving a room for the hearing, if one is needed, prior to submission of this form.

Student Name: _____ Degree: _____
last first MA, MM, DMA, PhD

What degree requirement will this recital fulfill?

| | | | |
|---|---|----------------------------|-------------------------|
| <input type="checkbox"/> Master's | } | _____ | |
| <input type="checkbox"/> Doctoral primary area | | <i>Major/Academic Area</i> | <i>Instrument/Voice</i> |
| <input type="checkbox"/> Doctoral supporting area | | | |

Date of Pre-Recital Hearing: _____ Time: _____
It MAY NOT be closer than 4 weeks before the Recital

We agree to work with this student and attend the Pre-Recital Hearing and the Recital (date to be finalized with Concert Manager).

| | |
|---------------------------------------|-------------|
| Committee Members (printed or typed): | Signatures: |
| Adviser/Chair 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |

Approved by the Director of Graduate Studies:

Signature Date

| |
|-----------------------------------|
| MUSIC GRADUATE OFFICE ONLY |
| Rec'd _____ |
| Database _____ Calendar _____ |
| Copy to Beall Hall Mgr _____ |

Note: This form will not be accepted without Part I