Minnesota State University Mankato
Department of Music and Music Scholarship Committee
202 Performing Arts Center
Minnestota State University, Mankato
Mankato, MN 56001
This form must be received by April 1st, 2011

Teacher Recommendation Form

Name of Applicant:_____ _____ _____
First Middle Last

High School_____City_____ State_____

Name of Recommending Teacher_____

Position_____

Your Email:_____ Confirm Email_____

How long have you known this student?_____

Please check the appropriate boxes in evaluating this student's musical ability.

	No Basis for Evaluation	Average	Good Top 25%	Excellent Top 10%	One of the top few encountered in my career.
Technical Music Ability					
Musical Sensitivity					
Solo Performance Ability					
Ensemble Musicianship					
Practice Habits					

What are the musical strengths of this student?

What other information would you like us to know about this student?

Thank you for your evaluation of this applicant