

REQUEST TO PARTICIPATE IN ADVANCED INSTRUMENTAL MUSIC PROGRAM

1. Student's Name: _____

School: _____ Grade: _____ Track: _____

Present Classroom Teacher: _____ Room: _____

Student's Address: _____
City zip

Hm Phone: _____ Cell Phone: _____

2. What instrument did your child play last year? _____

3. Last year my child used a: _____ SCHOOL INSTRUMENT
_____ HIS/HER OWN OR RENTED INSTRUMENT

4. Please check one:
_____ I will provide an instrument for my child.
_____ I would like to be considered for loan of a district instrument. (there are only a limited number of school instruments available. If you would like to be considered, please pick up an application form at the office of your child's school.)

Parent/Guardian Signature

Student Signature

PLEASE RETURN THE COMPLETED FORM TO THE CLASSROOM TEACHER

(This section to be completed by classroom teacher.)

CLASSROOM TEACHER:

**Please rate the above student's class work and homework: (circle one)

Outstanding Above Average Average Below Average

**Please rate the above student's citizenship and responsibility: (circle one)

Outstanding Above Average Average Below Average

Teacher comments: _____

I understand students will be missing approximately one hour per week of class time and they should have a "C" average and good citizenship to be in music. (Please sign if this student has your permission to be in instrumental music)

Teacher's Signature: _____

PLEASE RETURN COMPLETED FORM TO THE SCHOOL SECRETARY OR TO THE INSTRUMENTAL MUSIC TEACHER.