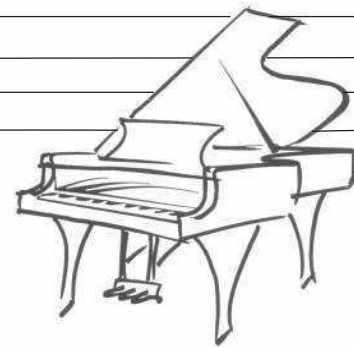




Community Music Division
DePaul University



Violin Scholarship Auditions

Sunday, May 22, 2016

2:00pm – 6:00pm

**Please fill out completely and return to the CMD office by
Monday, May 16, 2016.**

Student Name _____ Age _____ Grade _____

Parent Name _____ Email _____

Audition Level (please circle one): Primary Junior Intermediate Senior
(Book 1) (Book 2) (Book 3) (Book 4 +)

Audition Piece #1: _____ Composer _____

Audition Piece #2: _____ Composer _____

Will you use the CMD audition accompanist? (Circle One) **Yes**, I have enclosed a \$15.00 payment
(Checks made payable to DePaul University)
No, I will secure my own accompanist.

Visa MasterCard Discover AmEx Check #: _____

Card Number _____ Exp. _____ Security Code _____

Full Name on Card _____

I have read and fully understand the Audition Guidelines.

Parent Signature _____ Date _____

I approve this student's entry in the Scholarship Audition on May 22, 2016.

Teacher Signature _____ Date _____