APPLICATION FOR PETITION TO MAJOR SOUND RECORDING TECHNOLOGY

Please take this completed application to your coordinator. A minimum of one faculty reference supporting this application is required and should be submitted directly to your coordinator.

Name: _____ Student ID#: _____

Local Address: _____
Street Address City State Zip Code

Local Phone: _____ e-mail Address_____

Permanent Address: _____
Street Address City State Zip Code

Permanent Phone: _____

1. Applied emphasis: _____
(instrument/voice range)

2. Referring faculty member: _____

3. Current advisor: _____

4. Musicianship grades: Applied grades:

Quarter 1 ____	Instructor _____	Quarter 1 ____	Instructor _____
Quarter 2 ____	Instructor _____	Quarter 2 ____	Instructor _____
Quarter 3 ____	Instructor _____	Quarter 3 ____	Instructor _____
Quarter 4 ____	Instructor _____	Quarter 4 ____	Instructor _____
Quarter 5 ____	Instructor _____	Quarter 5 ____	Instructor _____
Quarter 6 ____	Instructor _____	Quarter 6 ____	Instructor _____

Level completed of piano class: _____

Level of class piano now registered for: _____

Student Signature_____ Date_____

Division Coordinator Signature_____ Date_____

Petition to Major Recommendation

This completed recommendation should be given to the coordinator of the petitioning student's department.

To be filled out by student:

Student Name: _____

ID: _____

Petitioning to Major in: _____

Name of referring faculty member: _____

To be filled out by referring faculty member:

How long have you known the applicant?: _____

In what capacity?: _____

Do you recommend this student for their chosen major?: ☐ YES ☐ NO

Comments (*Please feel free to attach a separate letter*):

Signature: _____ Date: _____