

JAZZ REPERTOIRE PROFICIENCY EXAM: AM 440

STUDENT _____ ADVISOR _____

INSTRUMENT _____ APPLIED TEACHER _____

DATE _____

Hearing Committee (two required, three preferred)

NAME (printed) SIGNATURE GRADE (P/F)

1. _____
Director of Jazz Studies

2. _____

3. _____

FINAL GRADE _____

Comments, including specific reasons for a grade of "F" if applicable:

Execution of the Melody:

Knowledge of the Chord Changes:

Rhythmic Interpretation:

Stylistic Interpretation:

Other:

Please return completed form to the School of Music office (LH 229).

Copy to: Advisor Permanent file SOM Chair Applied Teacher