

MASTER CHORUS EASTSIDE

Vocal Assessment Form

DATE: _____

FULL NAME (print) _____ PREFERRED NAME _____

E-MAIL _____ CELL PHONE _____

1. **WHAT PART(s) DO YOU SING:** Soprano 1 Soprano 2 Alto 1 Alto 2 Tenor 1 Tenor 2 Bass 1 Bass 2

2. **HIGH SCHOOL CHORAL SCHOLARS PROGRAM:** If you are a high school student, please list your school choir and choral director, as well as your private voice teacher, if applicable.

3. List VOICE or ANY INSTRUMENT you have studied privately

INSTRUMENT	NUMBER OF YEARS PRIVATE LESSONS
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_____	_____
_____	_____

4. **PAST AND PRESENT CHORAL EXPERIENCES** (school, church, college, community choir, All-State, etc.)

5. **OTHER MUSICAL EXPERIENCES** (solos, accompanying, band, orchestra, shows, pop groups, etc.)

6. **HOW WELL DO YOU READ MUSIC?** (circle): Well Above Average Average Below Average Little

7. **HOW WELL DO YOU LEARN YOUR PART?** Well Above Average Average Below Average Little

8. **HOW DID YOU LEARN OF MASTER CHORUS EASTSIDE?**

-----DO NOT WRITE BELOW THIS LINE-----

VOICE RANGE: S1 S2 A1 A2 T1 T2 B1 B2

PRS 0 1 2 3 4 5 6 7 8 9 10

VQ 0 1 2 3 4 5 6 7 8 9 10

INT 0 1 2 3 4 5 6 7 8 9 10

EAR 0 1 2 3 4 5 6 7 8 9 10

SR 0 1 2 3 4 5 6 7 8 9 10

ADDITIONAL COMMENTS: