

SPECIALLY CAPABLE JUNIOR MUSICIANS OFFICIAL APPLICATION JR 3-13

(Type or block print. Submit to area and state chairman one month prior to the Festival.)

This application form will be seen and used only by the state Festival chairman, the Festival site chairman and the judges. It will be held in confidence and will be available to the student or the minor student's parents if requested.

Supporting documentation that specifically describes the nature of the special capabilities of the student must be attached to the application.

Minor impairments require a note from the teacher clarifying same. Severe impairments require an additional note from a physician.

Festival Area _____ Year _____

Name of Performer _____ Age _____

Event _____ Class _____ Date and Time of Audition _____

Note: Teacher's Name, Phone Number, Signature, and Date Submitted should be submitted on a separate sheet included with this report, but **should not be included on this official application.**

Include a brief description of the special capabilities of the student. Information pertinent to the personality of the student is also important as well as any other details which will help the judges understand the special needs of the student when evaluating the performance.

One copy of this form should be returned to the teacher.

The area chairman should keep one copy of this form.

One copy of this form should be discreetly handed to the judges by the room monitor prior to the student's evaluation. It should not be returned to the student.

SCJM Classification: Approved _____ Not allowed _____ Date _____

Signature of Area Chairman _____

Signature of State Chairman _____

Valid for ONE Festival year only. Application must be re-submitted in subsequent years.

INSTRUCTIONS TO THE JUDGES