School of Music CONCERTO APPROVAL – MASTER OF MUSIC IN PIANO* (for Graduate Office Record)

Student's Name _____ Recital Date: _____

We, the undersigned committee, were present at this recital and report the following evaluation:

_____ Satisfactory _____ Unsatisfactory (check one)

(Chairperson)

I dissent from the foregoing report:

* Attach a copy of the program