Millersville University Choral Organizations Spring 2024 Audition Form

Please PRINT all information clearly, FRONT only.

Name:	Class: FR SO JR SR Other:			
Birthday (for in-class celel	orations!):			
Address (local):	(local): Zip:			
Phone (local):	Phone (cell)		Email:	
Address (home):				
	State:			
High School attended:				
High School Choral Direct	tor:			
Major:	Voice Pro	Voice Professor/Instrument		
			(if applicable)	
Previous Choral and/or So	lo Experience (be brief):			
You will be placed in an ensemb	le based on your audition, however,	you may express	your preference if you wish.	
University Choir (M	1WF 12:00-12:50)			
University Chorale	(TTh 2:30-4:00)			
	s Choir (MW 5:30-7:00)			
Cantilena women's	(in (in (in in 5.50 7.00))			

Signature: _____

Please notify the Director as soon as possible if any change in the above statement needs to be made.

FACULTY USE ONLY

Date://	Auditioner:			
Name of prepared piece:_				
Vocal Range:				
Soprano	Alto			
Tenor	Bass			
Reading Knowledge:	Plays instrument:			
Aural Response:	Sightsinging:			
Musicianship:	Quality:			
Type of credit desired:	Graduation Credit Non-Academic No Credit			
Vocal Comments: (prepa	ration, timbre, quality, flexibility, intonation size of voice, etc.)			
Rating:	Voice:			
Part:				
Recommended for:	Univ. Choir Chorale Cantilena			
Date entered choral group):			