

IMA STRING ORCHESTRA PERSONNEL FORM

Name of Institution: _____ Fax No: _____
 Director of Orchestra: _____ School Phone: _____
 Home Phone: _____ Cell Phone: _____
 E-mail: _____

Submit the names and other pertinent information related to the students who you recommend for the IMA String Orchestra. These persons are to be your first choice. Please evaluate (rate) each student on their ability to perform medium difficult and difficult music with a **minimum** of rehearsals.

Use the following scale: 1-Excellent; 2-Very Good; 3-Average; 4-Fair

Name	Instrument	Classification	Performance		
			Evaluation	M	F
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Please complete and return to:

Dr. Timothy Holley
 North Carolina Central University
 207 C. Ruth Edwards Music Hall
 1801 Fayetteville Street
 Durham, NC 27707

Office: 919-530-6437
 Fax: 919-530-7979
 E-mail: tholley@ncsu.edu