

# Central Washington University

## Music Program Recommendation Form

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*Writer's Statement of Recommendation:*

Applicant's Name: \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

In what capacity? \_\_\_\_\_

Student's Primary Instrument. \_\_\_\_\_

Please rate the applicant among their peers in the following categories:	Top 5%	Top 10%	Top 25%	Top 50%	Insufficient knowledge to rate applicant.
Musicality					
Technical Proficiency					
Academic Aptitude					
Openness to Ideas					
Supportiveness of Colleagues					
Motivation					
Self-Discipline					
Leadership Skills					
Work Ethic					

*Comments and Recommendations:*

*On the back side of this form or on an attached sheet, please include additional information about the applicant.*

Writer Signature: \_\_\_\_\_ Position \_\_\_\_\_

Printed Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_

Please return completed form to:

Central Washington University  
 Mailstop 7458  
 400 E University Way  
 Ellensburg, WA 98926

Or email to: Anne.Smethurst@cwu.edu