

Instrument _____

Order in Audition # _____

Illinois State University Ensemble Placement Audition

Personal Information

PLEASE PRINT NEATLY!

Name (formatted in the way you wish for it to appear on concert programs)

(first)

(middle or initial)

(last)

(suffix)

Home Address (Number/Street, Town, State, Zip)

Cell Phone: _____ UID: _____

ISU Email: _____@ilstu.edu Alternate Email: _____

High School Attended: _____ Conductor: _____

Year in School: Fresh Soph Junior Senior Senior+ 1st yr Grad 2nd Year Grad Grad+

Major: _____ Minor: _____

Ensemble Information

Meeting times:

Symphonic Band, Symphony Orchestra, and Symphonic Winds: Tuesday/Thursday, 4:00 – 5:50PM

Wind Symphony: Monday, Wednesday, Friday, 12:00 – 1:50PM

Please indicate any class conflicts with any of the above-mentioned time slots (use back of form, if needed), keeping in mind that you might be assigned to more than one ensemble:

Course number: _____ Course name: _____ Day/Time: _____
(e.g. MUS 987) (e.g. Intro to Kazoo) (e.g. T/R, 5-7)

Course number: _____ Course name: _____ Day/Time: _____
(e.g. MUS 876) (e.g. Intro to Mind-blowing) (e.g. M, 12-1)

If not placed in Wind Symphony, are you available and interested in performing occasionally with WS if extra musicians are needed? YES NO

Are you interested in participating in chamber winds? YES NO

Are you planning on participating in Jazz Band YES NO

Would you like to be considered for participation in Chamber Orchestra? YES NO