

**COFAC Recital Hall**  
**Western Illinois University School of Music**  
**STUDENT COMBINED RECITAL PRE-AUTHORIZATION FORM**  
**Junior performance and all other non-performance students and groups**

*Please bring this completed AND SIGNED form to the Recital Hall office when you come to schedule your recital. A reservation will not be made without required signatures on this form. You may look at the Recital Hall/School of Music Google calendar with your professor, who has access to it. You will receive all other pertinent forms upon confirmation of your recital date. Email Joanie at [je-herbert@wiu.edu](mailto:je-herbert@wiu.edu), or visit my office in the Recital Hall lobby, if you have any questions.*

**TWO STUDENTS OR MORE; MUSIC NOT TO EXCEED 90 MINUTES**

<b>Name (designated contact):</b>		<b>Today's date:</b>	
<b>Instrument or voice part:</b>		<b>Fr__ So__ Jr__ Sr__</b>	
<b>Applied professor:</b>		<b>Major: Vocal Performance</b>	
<b>Telephone:</b>	<b>E-mail:</b>		
<b>Degree Required__ Optl.__</b>	<b>Degree: B.A.__ B.M.__ M.M.__ Honors__</b>		
<b>Name:</b>		<b>Today's date:</b>	
<b>Instrument or voice:</b>		<b>Fr__ So__ Jr__ Sr__</b>	
<b>Applied professor:</b>		<b>Major:</b>	
<b>Telephone:</b>	<b>E-mail:</b>		
<b>Degree Required__ Optl.__</b>	<b>Degree: B.A.__ B.M.__ M.M.__ Honors__</b>		
If there are more students, please use the additional page of this form.			

***Time & Date Choices:** Please enter 3 preferences in 1,2,3 order. Note that not all times will work on any given day due to previously scheduled performances or rehearsals on the same day.*

**Available times (if calendar permits):**

- Weeknights 5pm or 7:30pm
- Weekends 11am, 1pm, 3pm, 5pm or 7:30pm

	<b>Day</b>	<b>Date</b>	<b>Time – 11:00, 1:00, 3:00, 5:00, 7:30</b>
1			
2			
3			

**Signatures (required BEFORE recital is scheduled):**

- (for non-group recitals) We accept the responsibility of scheduling a pre-recital hearing to be held at least 4 weeks before this recital date. We understand that this recital is tentative pending the outcome of this hearing.

\_\_\_\_\_  
**Student**

\_\_\_\_\_  
**Student**

\_\_\_\_\_  
**Applied Professor**

\_\_\_\_\_  
**Applied Professor**

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**Faculty Advisor (student organizations)**