FSU Music Program

Sophomore Qualifying Exam Approval Form

Name _____

Instructor _____

Date of Exam

_____

Instrument/Voice Alto/Contralto

Accompanist _____

Semester Fall

Year _____

Degree Program B.A. in Music

Faculty Recommendations for Sophomore Qualifying

Exam Recital Program Attached ☐

Program Notes Attached ☐

	Faculty Signature	**Date of Recital**
Pass / Fail		
Pass / Fail		
Pass / Fail		
Pass / Fail		
Pass / Fail		
Pass / Fail		