

Name of Applicant

Applied Music Program Application for Audition



Please fill out this form electronically (preferred) or print clearly. See **smc.edu/amp** for complete instructions, deadlines, and program guidelines. Email this form and all required application materials to **AMP@SMC.EDU**. If you do not receive a confirmation reply within two business days, please contact the music office via telephone at 310-434-4323.

Email

Postal Address: Street	Phone	
City, State Zip Code	SMC ID#	
Area of Study e.g., classical voice, trumpet, jazz piano, composition, etc.	Current Private Instructor or Performance Class Instructor optional	
1. List all the college-level music courses you have c	completed, indicating the school if not Santa Monica College.	
2. Describe all other previous musical study, includi	ng names of teachers/schools and numbers of years.	
3. Describe your musical performance experience.		
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4. Describe your educational goals, including	plans for transfer and planned	d transfer date if known.
5. Describe your professional and career goa	ls.	
6. List the pieces in the recordings you are su perform the same pieces. Composition appli	•	· ·
7. If you are accepted into the Applied Music	: Program, do you have a prefe	erence for who will be your instructor?
8. If invited to audition, which of the following I'm applying to study composition and we My audition pieces do not require an accompanist will bring \$25 (cash) for a piano accompanist. I would like help to determine the answer	vill be presenting scores and recompanist. <i>Note: Works with a</i> panist provided by SMC for a to	a written accompaniment must include it.
9. If accepted into the Applied Music Prograr would you participate while concurrently enrolled in high school? No Yes	m, 10. Have you c (or higher) in n No Yes	completed a bachelor's degree nusic?
Your signature below affirms and certifies the your knowledge. Signing also indicates under form may subject you to non-acceptance to action for fraudulent misrepresentation. Please	rstanding that any false statem the program, future removal f	nents or deliberate omissions on this rom the program, and/or disciplinary
Print or type your legal name	Signature	 Date