

LOCAL ASSOCIATION STUDENT WORKSHOP REPORT FORM

(Qualifying event for participation in the KMTA STATE HONORS RECITALS)

When your workshop is over, please complete this form and send it, along with any other materials you think might be helpful to local chapters who might be having a Workshop, to the Student Workshops Chairman. You may want to include such things as a Scale Olympics chart, a sample theory test, the letter of explanation of your Workshop that you sent out to teachers, or information of any ideas or activities you found successful.

Coordinator's Name: _____

Address: _____

E-mail: _____

Workshop Location: _____

Date: _____ **Facilities used:** _____

Did you rent facilities? _____ **Was a keyboard lab available?** _____

TOTAL NUMBER OF TEACHERS ENTERING STUDENTS: _____

How many were NOT member of KMTA? _____ **Fees paid?** _____

TOTAL NUMBER OF STUDENTS: Piano _____ **Strings** _____ **Other** _____

Number in: Novice phase _____ **Phase 1** _____ **Phase 2** _____

Phase 3 _____ **Phase 4** _____

Did you have a duet phase? _____ **How many ensembles?** _____

TOTAL QUALIFYING STUDENTS (Top 25% of total entries) _____

OTHER ACTIVITIES: (Please list other activities you had with your Workshop and attach pertinent forms to this sheet.)

1. _____
2. _____
3. _____
4. _____

JUDGES OR AUDITORS: (Include keyboard specialists, etc.)

1. Name & Address: _____

Professional Status: _____ Recommend? _____

2. Name & Address: _____

Professional Status: _____ Recommend? _____

3. Name & Address: _____

Professional Status: _____ Recommend? _____

4. Name & Address: _____

Professional Status: _____ Recommend? _____

Return to: Melissa Green; PO Box 127; Argillite, KY 41121
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