2021 AMERICAN SUZUKI INSTITUTE CHAMBER MUSIC PROGRAM ASSESSMENT FORM

Video and this completed form are due by June 8, 2021. Forms received after June 8 are not guaranteed placement.

Student's Name:			Instrument:		
Date of Birth:			Phone:		
Parent's Name (whether coming or not):			Email:		
Home Teacher's Name:			Phone:		
Address:			Email:		
Do you have a pre-formed group?			If yes, list names and instruments		
With your teacher's assistance Repertoire studied by student		vear. Lis	t names of pieces and con	nposers, and any scale or technical	
studies used:	J	,	·	• ,	
Chamber Music experience (print in each – please note which e		embles in	which the student has pa	rticipated, and the number of years	
Which pieces have you performed in a Chamber Ensemble? Which chamber pieces have you studied at ASI?					
To be completed by home teacher. Students will likely receive music on the first day. Check only those skills in which the student can SIGHTREAD with ease. (Please underestimate ability so that the ensemble has the opportunity to delve into the intricacies and artistry of a high level chamber ensemble performance).					
Positions (strings only)	Keys	Meters		Skills (Rate 1 – 3, 3 = strong)	
☐ 1st	☐ Up to 3 sharps	□ 2/4	3/4, 4/4 (C)	Rhythmic Independence	
☐ 2nd	Up to 3 flats		npound time (6/8, etc.)	Overall reading	
☐ 3rd	☐ All keys			Leadership	
☐ 4th				Experience in Chamber Music	
☐ 5th and above					
Teacher's Signature: Printed:					
the level of your playing. Your	video will be uploaded to an	n ASI play	list viewable only be the	aying one selection which represents assessment committee, and it will be ideo and this completed form are	
Please include your last name a YouTube link to my video: Please use the same video f participate in the ASI Chamber	or my application for an Hono	ors Recita	al performance. Pianists ar	 nd bassists need pre-approval to ned ensembles are welcomed.	