



RECOMMENDATION FORM  
Graduate Studies

School of Music  
College of Creative Arts

***PART C***

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Please give a short summary of your evaluation of the applicant as a prospective scholar, performer, or composer, including your estimate of those personal, academic, and artistic traits which might affect the student's probable success in graduate study.

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*Recommender please return to:*

Director of Graduate Studies in Music; College of Creative Arts; WVU, School of Music  
PO Box 6111; Morgantown, WV 26506-6111 or email to: **Music@mail.wvu.edu**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

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Position Title

\_\_\_\_\_  
Institution

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Phone Number

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Address

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City, State, Zip