

High School Vocal Institute Voice Placement Hearing Form

Please complete this form and bring it with you to registration

Name _____

School _____

Grade (entering Fall)_____

Voice Part _____

Previous choral experience _____

Piano/Instrumental experience _____

_____ Please do not write below this line _____

Tone: H M L

Color:

	1	2	3	4	5
	(F)				(R)

Sight Reading: 1 2 3 4 5

Tonal Memory: 1 2 3 4 5

Recommended Ensemble: