

STUDENT ELIGIBILITY WAIVER for ASAA MUSIC FESTIVAL PARTICIPATION Page 1

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To participate in one of the Alaska State Music Festivals:

- 1. Students must be eligible according to the rules and regulations of ASAA, their regions and individual schools.
- 2. Students must be enrolled in grades 9-12.
- 3. Students must be enrolled in their school's music program. Music programs shall include any music activity offered by the school that has a performance objective, or, any music performing class for which the school awards credit, whether or not that class is conducted at the school.
- 4. Students in an "alternative education program" as defined in the ASAA General Handbook under Article 1, Section 8, must be enrolled in a corresponding music performing class at their School of Eligibility, at which they may be selected for participation through a competitive audition process.

ASAA may waive the requirement for students enrolled in alternative education schools or in the event that the individual school of eligibility does not offer music classes and/or does not offer a band, choir or orchestra program or the performing music class is in conflict with a required class.

FILING A WAIVER REQUEST:

A request for a waiver of the ASAA Music Festival Participation eligibility rules must be directed by the student to the involved member school's officially designated administrator who shall then file a written request stating the full particulars of the case and the student's and/or administrator's reason(s) for granting the waiver.

This request for waiver should then be submitted to the ASAA Music Coordinator Please complete ALL Information.

Student Name:	Grade:	Alaska HS Currently Attending:
Musical Instrument or Voice Part		
Waiver is being requested for which ASAA	A Music Festival:	All State Music Festival State Solo & Ensemble Music Festival
Have you participated in either of these fe	estivals before?:	Yes No
Explain:		

ALASKA SCHOOL ACTIVITIES ASSOCIATION, INC.

4048 Laurel Street, Suite 203 • Anchorage, AK 99508 • (907) 563-3723 • www.asaa.ora



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Utable should must a mere see and semilarly smalled in
High school music group you are currently enrolled in:
BAND CHOIR ORCHESTRA NONE Specific Music Class:
Are you getting high school credit for participating in the music group at your high school? Yes No
Explain if needed:
Are there music classes with a performance emphasis at your school that you could enroll in? \Box Yes \Box No
They are:
If you are not enrolled in your school music program or in an offered music class with a performance emphasis,
please explain your situation:
Is there a community music performing group that you are a member of for which your school gives you school
credit for participating in it? Explain:
Geographically, what is the closest high school with a music program to your residence that you could
participate in? miles away
Attach transcript from last semester and schedule for current semester
TO BE COMPLETED BY CLOSEST SCHOOL ADMINISTRATOR
Please be specific. Include back up letter(s) and support from the school admin, music director, etc.
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MUSIC DIRECTOR Name: Contact Email:
MUSIC DIRECTOR Name: Contact Email: Signature: Contact Phone: Do you support this request? YES NO
MUSIC DIRECTOR Name: Contact Email:
MUSIC DIRECTOR Name: Contact Email: Signature: Contact Phone: Do you support this request? YES NO
MUSIC DIRECTOR Name: Contact Email: Signature: Contact Phone: Comments if any: ADMINISTRATOR
MUSIC DIRECTOR Name: Contact Email: Signature: Contact Phone: Do you support this request? YES NO Comments if any:
MUSIC DIRECTOR Name: Contact Email: Signature: Contact Phone: Do you support this request? YES NO Comments if any: ADMINISTRATOR Name: Contact Email: Signature: Contact Phone: Do you support this request? YES NO
MUSIC DIRECTOR Name: Contact Email: Signature: Contact Phone: Do you support this request? YES NO Comments if any:
MUSIC DIRECTOR Name: Contact Email: Signature: Contact Phone: Do you support this request? YES NO Comments if any: ADMINISTRATOR Name: Contact Email: Signature: Contact Phone: Do you support this request? YES NO
MUSIC DIRECTOR Name: Contact Email: Signature: Contact Phone: Do you support this request? YES NO Comments if any: Contact Email: Signature: Contact Phone: Do you support this request? YES NO Comments if any: