



# SPECIAL NEED for ON-LINE AUDITION to qualify for the STATE SOLO & ENSEMBLE FESTIVAL

Please complete this form for each event needing special consideration for an on-line audition to participate in the current year's State Solo and Ensemble Music Festival.

## ABOUT THIS STUDENT OR ENSEMBLE

If a SOLO: First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Grade \_\_\_\_\_

Instrument or Voice Part \_\_\_\_\_

If an ENSEMBLE, # of Participants: \_\_\_\_\_ Type of Ensemble: \_\_\_\_\_ Style of Ensemble: \_\_\_\_\_

Title of Selection \_\_\_\_\_ Composer \_\_\_\_\_

If selection is Musical Theater, the show name is: \_\_\_\_\_

If you have your own accompanist, list their name: \_\_\_\_\_

## ABOUT THE SCHOOL / SCHOOL DISTRICT

School Name \_\_\_\_\_ Music Director \_\_\_\_\_

Music Director's Email \_\_\_\_\_

Principal Signature \_\_\_\_\_ Date \_\_\_\_\_

## SPECIAL CIRCUMSTANCES WARRANTING AN ON-LINE AUDITION

- A regional music festival is not available to me because:
  
- A regional music festival was available, however, I was not able to participate in this festival due to the following extenuating circumstances
  
- The AUDITION CATEGORY (identify) \_\_\_\_\_ was not available to me at the regional music festival.

## REQUIRED ATTACHMENTS

The following items MUST be attached to this form. If these items are not attached, your request for an on-line audition will not be considered.

- A letter from my school's music director is attached. This letter supports this application's request for an on-line audition.
- A letter from the regional festival chairperson is attached. This letter supports this application's request for an on-line audition.
- A copy of the music with measures marked and labeled with the student's name, instrument and school

ALASKA SCHOOL ACTIVITIES ASSOCIATION, INC.  
Scan and Email this form to office@asaa.org • (907) 563-3723 • www.asaa.org