



**BM PERFORMANCE
SOPHOMORE EVALUATION FORM**

STUDENT NAME: _____

STUDENT ID #: _____

INSTRUMENT: _____

DATE: _____

_____ The student named above successfully passed the Sophomore Evaluation and will be allowed to continue with upper division status towards completion of the degree Bachelor of Music in Performance.

_____ The student named above was not approved to continue with the BM in Performance, but is approved for study in music degrees other than BM Performance.

FACULTY JURY COMMITTEE:

Printed Name	Signature
_____	_____
_____	_____
_____	_____
_____	_____

Upon conclusion of the Sophomore Evaluation, please return this completed form with all signatures to Dr. Jill Coggiola, 108B Crouse College

*For Office Use Only:
One copy to file in 208 Crouse College*