

Hollins University Department of Music Preparatory Division

Application Form

NOTE: If the applicant is an adult and/or a beginner, some of the queries below are not relevant.
Please supply all applicable information and leave other blanks empty.

Pupil's Name: _____ Age: _____

School: _____ Grade: _____

Parents: _____

Address: _____

City, State, Zip: _____ Phone: _____

E-mail (if available): _____ Work Phone: _____

Previous private instruction, if any: _____ years

Previous teacher: _____

Level of recent repertoire (examples of pieces studied recently):

Other previous musical experience (church choir, school chorus, band, etc.):

Teacher _____ preference, _____ if _____ any:

I am interested in possible enrollment in beginning group classes: _____

[Signed] _____

Date: _____