

Deadline:  
September 5

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# Application to attend Solo & Ensemble Festival Adjudication Workshop

Sunday October 7, 2018 Location: Northern Michigan University

**The Process:** Each applicant must complete this application including the listing of two references and a brief statement about their beliefs concerning the aims and goals of the festival. This application will be reviewed by the District Executive Board and a recommendation will be made to the full State Executive Cabinet for a final decision. The results of the status of the application will be sent to each applicant following the meeting. Approved candidates must attend the workshop in its entirety to be placed on the Probationary List.

**NOTE:** Each applicant must include a brief paragraph on their beliefs about the aims and goals of festivals and have this application signed by two colleagues.

Print Name: \_\_\_\_\_ MSBOA District in which you reside & teach \_\_\_\_\_  
Home Address \_\_\_\_\_ Email \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_  
Present Position \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_  
School Address \_\_\_\_\_ School Phone (\_\_\_\_) \_\_\_\_\_ ext. \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ FAX (\_\_\_\_) \_\_\_\_\_

List the college(s)/universities that you have attended and degree(s):

INSTITUTION(S)	DATES ATTENDED	DEGREE
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please list your teaching experience (all types.) A minimum of five (5) years total is required, ten (10) years preferred.

Institution	Dates	Music area(s) and grades taught
_____	_____	_____
_____	_____	_____
_____	_____	_____

How are you maintaining your performance skills? \_\_\_\_\_

List any previous adjudicating experience that you have had (where, what & when): \_\_\_\_\_

What experience have you had in preparing students for this type of festival? \_\_\_\_\_

List up to five specific instruments (not instrument families ie: woodwinds or strings).

List only those instruments that you feel qualified to critique and are prepared to adjudicate.

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_ 5. \_\_\_\_\_

**REFERENCES:** Please have two colleagues/peers sign below in support of this application.

***"I support this application for the candidate to be considered as an adjudicator for MSBOA Solo & Ensemble Festivals."***

Print name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ Signature \_\_\_\_\_

Print name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ Signature \_\_\_\_\_

I understand that I must attend a full-day workshop (\$35 registration fee) before being placed on the Probationary Adjudicator List. I have included my brief paragraph on my beliefs about the aims and goals of festivals and this application has been signed by two colleagues.

**SIGNATURE OF APPLICANT** \_\_\_\_\_ Date \_\_\_\_\_

Return this application and the paragraph to: **Emily Morgan-Booth** email: [ebooth@mapsnet.org](mailto:ebooth@mapsnet.org)