LESSON PARTNERSHIP COMMUNICATION FORM

Dear Private Lesson Teacher,

We recognize your involvement in the musical growth of this student as being a very important aspect of his/her success in the Edina Band Program. In order to improve the differentiation of our instruction to each student, we want to partner with you by asking you and the student to complete this form together. Thank you for your work with this student!

This form is due to the EHS band department no later than FRIDAY, JANUARY 27. Keep in mind Quarter 2 (Semester 1) ends Friday, JAN. 27

Student Name	ent Name Instrument								
To be completed by the TEACHER:									
Contact Information: Name:									
Phone #:									
Email:									
How many lessons has this student had with you from November 4 – January 27?									
Do you have openings for more private students?	YES	NO							
What is the best way to refer students to your studio	?	PHONE	EN	MAIL		O	ГНЕІ	₹	
If that contact information is different from what is provided about, please write that info below-									
To be completed by the STUDENT: What etudes/method books are you studying from?									
What SOLOS are you currently working on?									
To be completed TOGETHER:									
Please select the level of your musical proficiency in	the follo	ow areas:							
			Master	·y		1	Need	s Improvement	
1. Characteristic Tone Production			5	4	3	2	1	0	
2. Technical Proficiency			5	4	3	2	1	0	
3. Rhythm Proficiency			5	4	3	2	1	0	
4. Sight-Reading Proficiency			5	4	3	2	1	0	
5. Knowledge of Instrument Tendencies			5	4	3	2 2	1	0	
6. Overall Musicianship/Musicality			5	4	3	2	1	0	
Additional Comments (i.e. What goals have you set?	Had an	y recent breal	kthrough	s? Wh	nat per	tinent	thing	s you want to share?):	
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I			_						
Lesson teacher Signature			Da	ate					