

EAST LOS ANGELES COLLEGE
MUSIC DEPARTMENT
APPLIED MUSIC PROGRAM

APPLICATION FORM

LATE SUBMISSIONS WILL NOT BE ACCEPTED. Once we have received your application, we will contact you with an audition date. Please EMAIL this form to Dr. Chie Nagatani at cnagatac@elac.edu

Name: _____ SID # _____

Address: _____

Phone _____

Email: _____

Choose one: Instrument: _____ OR Voice Category: _____

No. of years studied on instrument/voice _____

Was this: private lessons class/group instruction both

If class instruction at ELAC, list all courses taken: _____

I have successfully taken the following music courses:

Theory/Harmony: 101 200 201 202 203

Musicianship: 211 (217-2) 212 (218) 213 (219)

Piano: 321 322 323 324 3411 341-2 341-3 341-4

Music History: 111 121 122

I will be concurrently enrolled in an ensemble. (Course name/no. _____)

I plan to complete my AA music degree within the next _____ years:

YES NO

Pieces I will be performing for the audition* (include composer):

1. _____

2. _____

Pieces I have studied in the past year (optional):

1. _____ 3. _____

2. _____ 4. _____

*WILL YOU REQUIRE AN ACCOMPANIST FOR YOUR AUDITION ? _____