FREDERICKSBURG CONCERT BAND

P.O. Box 7913 · Fredericksburg, VA. 22404-7913

*Christopher Fens, Music Director*

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**www.fredericksburgconcertband.org**

# STUDENT RECOMMENDATION FORM

**To be completed by the student's high school band director. Return via mail or email.**

**Students requesting membership must also complete the online Fredericksburg Concert Band membership application.**
**No student will be considered for membership without an official recommendation from the high school band director.**
**An FCB representative will contact the student when the recommendation form and the online application are both received.**

Student's Name: _____ Instrument: _____

High School: _____ School Phone: _____

HS Band Director: _____ BD Direct Phone #: _____

HS Band Director Email:_____

## DIRECTOR'S RECOMMENDATION

Please rate your student's abilities in the following categories using the following rubric scale.

**0 - - - - - - - 1 - - - - - - - 2 - - - - - - - 3 - - - - - - - 4 - - - - - - - 5 - - - - - - - 6 - - - - - - - 7 - - - - - - - 8 - - - - - - - 9 - - - - - - - 10**

Unacceptable — Improvement Needed — Acceptable — Outstanding

A: Musical Ability ____ C: Dependability____ E. Attendance ____

B: Character ____ D. Attitude ____ F. Punctuality ____

**PARTICIPATION RECORD / # YEARS** (indicate # of years for each that apply)

Symphonic Band _____ Marching Band _____ Brass Ens. _____ Woodwind Ens. _____

Jazz Band _____ Concert Band _____ Pep Band _____ Percussion Ens. _____

**OTHER PERFORMANCE ACTIVITIES / YEARS** (indicate # of years for each that apply)

All-District Band _____ All-VA Auditions _____ Community Band _____

All-County/City Band _____ All-VA Band/Orch. _____ Private Lessons _____

Solo / Ensemble _____ Other _____ Other _____

**ADDITIONAL COMMENTS:** _____

_____

_____

## FINAL RECOMMENDATION: _____

**0 - - - - - - - 1 - - - - - - - 2 - - - - - - - 3 - - - - - - - 4 - - - - - - - 5 - - - - - - - 6 - - - - - - - 7 - - - - - - - 8 - - - - - - - 9 - - - - - - - 10**

NOT Recommended — Recommend w/ Reservation — Recommend w/o reservation — Strongly Recommend

Director's Signature_____Date_____