

Name: \_\_\_\_\_

City/State: \_\_\_\_\_ School Classification: \_\_\_\_\_

Director: \_\_\_\_\_ Number of Performers: \_\_\_\_\_

**Selections (in performance order):**

Title	Composer/Arranger
_____	_____
_____	_____
_____	_____
_____	_____

**Tonal Skills Assessment:**

Consider: Tonal Focus, Pitch Accuracy, Intonation, Balance, Blend, and Harmonic Texture

**Technical Skills Assessment:**

Consider: Rhythm, Pulse, Diction, and Breath Control

**Expression Skills Assessment:**

Consider: Tempo, Style, Phrasing, and Dynamics

**Performance Skills Assessment:**

Consider: Appearance, Posture, Non-verbal Communication, and Protocol

**Rating:**

- Superior    Excellent    Quality

\_\_\_\_\_  
**Signature of Evaluator**

\_\_\_\_\_  
**Date**