

Director/Instructor Evaluation Form

Date:

will be attending the 2024 Penn Band Summer Music Camp. Please take the time to fill out this form and **mail it back to our office before July 1st, 2024.** Your comments will aid in part assignment within the camp band, as well as development of the program for both the individual and group.

Your Name and Title:	
Organization:	
Mailing Address:	
Phone:	Email:
What primary instrument does the s	tudent play in your organization?:

What chair does the student sit in/part does the student play on a regular basis?:

Please rate the student in the following categories (CIRCLE) (1 – Excellent, 5 – Needs Work):

Musicianship:	Excellent	2	3	4	Needs Work 5
Range:	1	2	3	4	5
Intonation:	1	2	3	4	5
Sight-Reading:	1	2	3	4	5
Rehearsal Technique:	1	2	3	4	5
Attitude:	1	2	3	4	5
Overall	1	2	3	4	5

What does the student need to work on the most at this point of his/her training?

Anything else that you would like to add to this evaluation (use back if necessary)?

Name (printed)_____

Signature_____

Return this form by email to <u>kgupta@upenn.edu</u></u> Kushol Gupta, Ph.D. – Assistant Director, Penn Band Room 182 Stouffer Commons – Platt SPA House 3702 Spruce Street, Philadelphia PA 19104