

Setnor Voice Jury Assessment Form

Repertoire: Tiles & Composers (Font will adjust to fit in box.)

Name: _____ 1: _____ 5: _____
 Teacher: _____ 2: _____ 6: _____
 Voice: _____ Semester: _____ 3: _____ 7: _____
 4: _____ 8: _____

Ranking
 (1 is weakest,
 5 is strongest)

Comments

Breathing/use of breath		
Posture		
Physical tension		
Tone quality		
Vibrato		
Resonance		
Evenness of registers		
Vowel clarity		
Diction/Articulation		
Intonation		
Legato		
Musicality		
Style		
Demonstrated connection to text		
Ability to learn music* <small>*For Performance Honors/Sophomore Evaluation</small>		
Initiative*		
Work ethic/commitment*		

Additional Comments can be written on the reverse.

Faculty Signature _____ **Date** _____