

**BRANDON UNIVERSITY**  
**SCHOOL OF MUSIC**  
**MASTER OF MUSIC PROGRAMS**

*Confidential report on application for Master of Music Studies*

Applicant's Name: \_\_\_\_\_

Desired Program: Performance & Literature \_\_\_\_\_

Music Education \_\_\_\_\_

**TO THE REFEREE:**

In what capacity, how well, and for how long have you known the applicant?

\_\_\_\_\_

Please indicate your rating of this applicant in each of the following areas:

**(1 = fair, 2 = good, 3 = very good, 4 = outstanding, x = cannot say)**

Academic preparation \_\_\_\_\_

Intellectual ability \_\_\_\_\_

Industry & Initiative \_\_\_\_\_

Teaching ability \_\_\_\_\_

Musicality \_\_\_\_\_

Personal integrity \_\_\_\_\_

Writing ability (English) \_\_\_\_\_

Verbal skills (English) \_\_\_\_\_

Overall suitability for graduate studies \_\_\_\_\_

Among individuals of comparable backgrounds with whom I have been associated, I would rank the applicant in:

The upper 25% \_\_\_\_\_

The upper 10% \_\_\_\_\_

The upper 5% \_\_\_\_\_

**(OVER, PLEASE)**

Please share in the space below (or, if preferred, in an attached letter) your comments regarding the applicant's musical and academic strengths, and your estimate of the likelihood of his/her completion of this graduate program.

**Name of Referee:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Institution:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Referee's signature:** \_\_\_\_\_

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

**PLEASE RETURN TO:**

**Chair, Graduate Department  
School of Music  
Brandon University  
Brandon, MB, Canada R7A 6A9  
FAX: (204)728-6839**