

Please describe the student's ability/skill/aptitude in the following areas: *

	Excellent	Satisfactory	Poor
Initiative	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Self-reliance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reliability/Attendance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Preparation of music	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Technique	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sight-reading	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Potential for success	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marching Ability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to work with other students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to work with director(s)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Is there anything you'd like to add or that would be important for us to know as we make selection decisions?

Your first name: *

Your last name: *

Your email address: *

Thank you for taking the time to complete this form; your input is critical to the success of our selection process.

Please mail your completed form to:

**Cyndi Mancini
927 1st Avenue
Coraopolis, PA 15108**