The Junior Music/Summer Music Clinic is a course of study for talented pre-college students (Middle School and High School level students). During the three week summer session, students receive individual and small group instruction on at least two instruments (including voice). They will receive intensive instruction in music theory (including written work), ear training/sight-singing, keyboard, music literature, and music technology. In addition, students will be able to participate in instrumental, keyboard and vocal ensembles.

Located on the Norfolk State University campus, the music building houses keyboard and computer/music laboratories and a recording studio. Students who study in the clinic one or more summers and come to Norfolk State as music majors may gain admission without the usual theory and applied diagnostic tests.

The goals of the clinic are (1) to provide an opportunity for students to improve musical skills and (2) to prepare future majors for university level work in music.

June 16 – July 3, 2014 8:00 – 2:00 p.m. Monday through Thursday  Tuition: $300.00.

For further information, you may call Dr. Patricia Saunders Nixon at (757) 397-7552 H or (757) 277-4131 C or the NSU Music Department Office at (757) 823-8544 or 823-8025.

All Monies are due by June 3, 2014.

Please fill out the lower portion of this form and return to: Norfolk State University, Music Department, 700 Park Avenue, Norfolk, VA 23504 by June 3, 2014.

Name _____________________________ Address ____________________________________

Phone _____________ Emergency no. ___________ Age _____  Grade passed to: ______

Parent or Guardian print ___________________ Signature: _________________________

Address if different from applicant ______________________________________________

List instruments you play in order of proficiency:

1. ___________________  2. ___________________  3. ___________________

Voice range: circle one (Soprano, Alto, Tenor, Baritone, Bass)

List of awards and recognition for excellence received _______________________________________

__________________________________________

Applicant’s Signature ____________________________

Recommended by _____________________________ Special Needs______________________