

Heartland Horn Camp

July 22-25, 2024
Carroll, Iowa

RECOMMENDATION FORM

Name of Applicant: _____

Name, address, phone number, email address, and title (if appropriate) of the person completing this recommendation:

Name: _____ Title: _____

Address: _____ Phone: _____

_____ Email: _____

1. How long and in what capacity have you known the applicant?

2. In comparison with other high school horn students you know known, how would you rate the applicant in the following areas? If you are unable to evaluate an area, please check "No Comment".

Excellent

Very Good

Average

Below Average

No Comment

Musicality/Musicianship

Emotional Maturity

Leadership

Motivation

3. If you wish, please use the remaining space of this form or a separate page to convey any other pertinent information about the applicant.

Signature: _____

Date: _____

Since your responses are confidential in regard to the applicant, please seal the form in an envelope and then sign across the seal before returning it to the applicant. Recommendations are to be included with the other application materials for transmittal to Wayne Lu by the applicant. Thank you for your time and assistance in preparing this application.

Heartland Horn Camp
Wayne Lu – Director
215 S. Maple St.
Carroll, IA 51401
641-691-5807