

Date Information Received

\_\_\_\_/\_\_\_\_/\_\_\_\_



Teacher \_\_\_\_\_

Time \_\_\_\_\_

Start Date \_\_\_\_/\_\_\_\_/\_\_\_\_

134 S. Union Street, Spencerport, NY 14559 • (585) 352-8686 • Fax (585) 349-3060  
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**OFFICE USE ONLY**  
**PROCESSING NEW STUDENTS**

- \_\_\_\_\_ Type student information into the computer
- \_\_\_\_\_ Fill out New Student Form for teacher (put in teacher's folder)
- \_\_\_\_\_ Fill out New Student Form for Dori (Put in clip on wall for Dori)
- \_\_\_\_\_ Fill out 2 copies of policy letter (leave on desk to be signed by parent and/or student)
- \_\_\_\_\_ Give one copy signed policy letter to parent/student
- \_\_\_\_\_ Put our copy of policy letter in notebook on phone counter
- \_\_\_\_\_ Add student's name to the day and time on the schedule on the clipboard
- \_\_\_\_\_ Add information to the new student rotation \_\_\_\_/\_\_\_\_/\_\_\_\_ Date and \_\_\_\_\_ Initial when completed. \_\_\_\_\_ Put this form in the notebook in the office.

## STUDENT INTERVIEW FORM

To reserve a lesson time at *Dori's Music Studio*, please complete this form and submit to *Dori's Music Studio* by email or send to the above address. THE STUDIO OFFERS LESSONS TO STUDENTS AFTER SCHOOL, EVENINGS, and SATURDAYS.

**PLEASE PRINT-Thank you**

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

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

Parent or Guardian's Name(s)\* \* *Needed for children pre K-12th grades only.*

\_\_\_\_\_

Work Telephone \_\_\_\_\_ Home Telephone \_\_\_\_\_

Cell Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Grade in School \_\_\_\_\_ Name of School \_\_\_\_\_

Family Musical Involvement (list briefly) \_\_\_\_\_

\_\_\_\_\_

**\*\*APPLICANT LESSON TIMES ON REVERSE SIDE\*\***

## Student Interview Form continued

What musical activities does the applicant currently participate in both home and at school?  
(list briefly) \_\_\_\_\_

Specify lessons student is interested in \_\_\_\_\_ (ex. Piano, guitar, voice, etc.)

Has the applicant played specified instrument before? (Place an X) YES \_\_\_\_\_ NO \_\_\_\_\_

If YES, has the applicant taken private lessons before? (Place an X) YES \_\_\_\_\_ NO \_\_\_\_\_

Does the applicant have any special learning or learning environment needs? (please be specific) \_\_\_\_\_

How did you hear about the studio? \_\_\_\_\_

**Availability:** On the days available, please indicate the earliest and latest times the applicant can attend a lesson on that day.

	<i>Earliest Time Available</i>	<i>Latest Time Available</i>
<b>Monday</b>		
<b>Tuesday</b>		
<b>Wednesday</b>		
<b>Thursday</b>		
<b>Friday</b>		
<b>Saturday</b>		

### INSTRUMENTAL APPLICANTS ONLY

What type of instrument do you have? (please indicate which one) acoustic guitar, electric guitar, drum set, practice pad, flute, saxophone, clarinet, oboe, trumpet, trombone, french horn, violin, piano, keyboard.

Needs to rent an instrument, will come in and do at the first lesson? YES \_\_\_\_\_ NO \_\_\_\_\_

Needs to buy an instrument? YES \_\_\_\_\_ NO \_\_\_\_\_

### VOICE APPLICANTS ONLY

What is the applicant's vocal range?

Soprano Alto \_\_\_\_\_ Tenor \_\_\_\_\_ Bass \_\_\_\_\_