Please fill out, SAVE AS and email PDF to dmoyer@elcamino@edu. In addition, please bring a physical copy to your audition.

ECC CONCERT JAZZ ENSEMBLE AUDITION INFORMATION FORM

Name	Instrument
Email Address	Phone Number

Check all the following that apply:

◯ I'm currently an ECC student ◯ I'm in the Applied Music Program

◯ I'm not a current ECC student. If not, specify current status_____

1) Name of high school(s) attended within the last five years

_____

2) I am available for the full rehearsal time on any of the following days (check which ensemble):

Wednesday Nights ◯
CONCERT JAZZ BAND
Music 267 or 567 (section #5551 or 5580)
6:00-9:10pm 9/1/21-12/15/21

Monday ◯
STUDIO JAZZ BAND
Music 266 or 566 (Section #5548 or 5579
6:30-10:05pm 9/6/21-12/13/21

3) Do you double on any other instruments (soprano/alto/tenor/bari sax, flute, Bb clarinet, bass clarinet, etc.)?

_____

4) How comfortable are you with sight-reading? (scale 1-10, 10 being the most comfortable)

Check one: ◯ 1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯ 6 ◯ 7 ◯ 8 ◯ 9 ◯ 10

5) How comfortable are you with improvising? (scale 1-10, 10 being most comfortable)

Check one: ◯ 1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯ 6 ◯ 7 ◯ 8 ◯ 9 ◯ 10

6) Please cite any previous Jazz Big Band or Jazz Ensemble experience:

_____

_____

7) Do you anticipate any conflict days during the semester that would interfere with rehearsal or a performance date?

_____

◯ ◉