

GT MUSIC EXPERIENCE  
**STUDENT SELF-NOMINATION FORM**

**Student Name** \_\_\_\_\_ **Grade** \_\_\_\_\_

**Address** \_\_\_\_\_

**School** \_\_\_\_\_ **Classroom Teacher** \_\_\_\_\_

Please check 'Always', 'Sometimes', 'Rarely', or 'Never' to describes how you feel about the following statements.

<b>Musical Interests Indicators</b>	<b>Always</b>	<b>Sometimes</b>	<b>Rarely</b>	<b>Never</b>
I enjoy doing musical things outside of school.				
I create my own music.				
I enjoy learning new music.				
I enjoy performing.				
I am involved in other musical activities outside of the school day (choir, theater, dance, private lessons).				
I am interested in learning new musical skills.				
I can work well with others.				
I express feelings and emotions through music.				
I would enjoy participating in a <b>GT Music event</b> .				

**DUE TO your Music Specialist by March 18, 2022.**