

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

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

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

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

Please check 'Always', 'Sometimes', 'Rarely', or 'Never' to describe 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 sing or play an instrument frequently.				
I create my own music.				
I enjoy learning new music.				
I enjoy dancing and moving to music.				
I study music privately and perform in recitals (piano lessons, violin lessons, etc.)				
I am involved in other musical activities outside of the school day (choir, theater, dance).				
I am interested in learning new musical skills outside of school.				
I feel like I can sing, play, or dance very well.				
I express feelings and emotions through music creatively.				
I would enjoy participating in this special music event.				

**DUE TO your Music Specialist by March 22, 2024.**