Initial Information Form:

Please return this form to marybeth.shaffer@du.edu

DATE OF INQUIRY:

Elementary Beginner ___
Elementary Transfer ___ (not offered Fall 2016)
Intermediate Transfer ___ (not offered Fall 2016)
Adult ___ (not offered Fall 2016)

PARENTS NAME(S): __________________________
PHONE: _____________(H) _____________ (CELL)
E-MAIL: __________________________

STUDENT NAME(S):
_______________________________ AGE: _______ GRADE ENTERING: ___
_______________________________ AGE: _______ GRADE ENTERING: ___

PREVIOUS STUDY
Teacher/Location _______________________ Years________ Months ____
Teacher/Location _______________________ Years________ Months ____

Do you have a piano in your home? ____
If so, is it acoustical or digital?____

COMMENTS:

________________________________________________________

Admissions follow-up (give date of Activity)
Information sent______________________________ Interview Completed ________
Follow up calls _________________________ Student enrolled ___________