



# SOLO – WINDS

## Assessment Form

Performance #: \_\_\_\_\_ MPA Date: \_\_\_\_\_ MPA Site: \_\_\_\_\_

Student Name: \_\_\_\_\_ School: \_\_\_\_\_ Declared Grade Level: \_\_\_\_\_

SCORE	EVALUATION AREA SPECIFIC ASPECTS	COMMENTS
<b>SC. = RATING with DESCRIPTORS</b> 13-15 I Superior A+ Outstanding 10-12 II Excellent A Advanced 7-9 III Good B Proficient 4-6 IV Fair C Basic 1-3 V Unprepared U Below Basic	+ Area of strength; Noticeably strong within rating <b>Blank</b> Commensurate to rating - Area of concern; Noticeably needing attention within rating	Use the space below and on the back for specific written input focusing on identifying and enhancing areas of strength as well as identifying and addressing areas of concern.

SCORE	EVALUATION AREA	COMMENTS
	<b>TONE</b> <input type="checkbox"/> Quality/Clarity/Characteristic Sound <input type="checkbox"/> Breath Support <input type="checkbox"/> Consistency (Throughout range of pitch & dynamics) <input type="checkbox"/> Balance with accompaniment	
	<b>INTONATION</b> <input type="checkbox"/> Consistency (Throughout range of pitch & dynamics) <input type="checkbox"/> Within the musical line/tonality <input type="checkbox"/> With accompaniment	
	<b>ACCURACY</b> <input type="checkbox"/> Time & Meter <input type="checkbox"/> Rhythm <input type="checkbox"/> Notes <input type="checkbox"/> Articulation (Beginnings/Slurs/Releases)	
	<b>TECHNIQUE</b> <input type="checkbox"/> Facility/Dexterity/Coordination <input type="checkbox"/> Consistency (Throughout range of pitch & dynamics)	
	<b>EXPRESSION</b> <input type="checkbox"/> Through Articulation <input type="checkbox"/> Through Tempo <input type="checkbox"/> Through Dynamics <input type="checkbox"/> Through Phrasing (shaping of notes/lines) <input type="checkbox"/> Through Idiomatic Style/Interpretation	
<b>TOTAL</b>  Add the five scores above	<b>FINAL RATING</b>  Convert the Total Score to the Final Rating according to the table on the right using the Roman numeral only. <b>Do not include a '-' or a '+'</b>	

OTHER FACTORS (+, Blank or -) (Not scored; does not affect Final Rating)	Adjudicator Signature
<input type="checkbox"/> Conduct & Approach <input type="checkbox"/> Appearance & Posture <input type="checkbox"/> Instrument & Hand Positions <input type="checkbox"/> Choice of Repertoire	_____

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Assessment Form – BACK

**ADDITIONAL COMMENTS**