

MISSISSIPPI CHORAL ART FESTIVAL
CLINICIAN COMMENT FORM

FORM 10

Rating (optional)

Clinician

SCHOOL _____ SCHOOL CLASSIFICATION (1A, 2A, etc.) _____

TYPE OF GROUP _____ NUMBER IN GROUP _____

TITLE OF SELECTIONS: 1. _____

2. _____

___ Accuracy (20 points possible): *(correct pitches & rhythms)*

___ Tone (15 points possible): *(beauty, vitality, warmth)*

___ Intonation (10 points possible): *(vertical & horizontal)*

___ Diction (10 points possible): *(purity of vowels, clarity of consonants)*

___ Balance (10 points possible): *(between sections)*

___ Blend (10 points possible): *(within sections)*

___ Technique (10 points possible): *(breathing, attacks, releases)*

___ Interpretation (10 points possible): *(historical style, dynamics, tempo, mood)*

___ Other (5 points): *(stage deportment, facial expressions, etc.)*

Ratings Scale:

I-Superior-85-100

II-Excellent-75-84

III-Good-65-74