

MHSAA STATE PERFORMANCE ASSESSMENT
MUSIC SUBSTITUTION APPLICATION FORM

FORM 2

School Name _____ School Classification _____

Choral Director's Name _____

Performing Choir /Ensemble _____

Please complete a separate form for each choir or ensemble requesting to perform a substitution of music.
Check the Mississippi, Texas, and Florida Prescribed Lists for these selections BEFORE submitting this form.

Title of Requested Selection	Composer/Arranger	Voicing	Publisher

Submit completed form by **January 14, 2023**
Jana Smith, High School Division President
1268 McGregor Drive
Wiggins, MS 39577
jsmith@stoneschools.org

_____ **APPLICATION APPROVED**

_____ **APPLICATION DENIED**

_____ **High School Division President**

_____ **Date**

Comments: _____

