

**Charlottesville Music Teachers Association  
Music Festival Rating Sheet**

Teacher # \_\_\_\_\_ Name of Student \_\_\_\_\_

Room \_\_\_\_\_ Time \_\_\_\_\_ Student Age \_\_\_\_\_ Level \_\_\_\_\_ Instrument \_\_\_\_\_

**Piece No. 1** Title \_\_\_\_\_ Composer \_\_\_\_\_

**Comments:**

**Piece No. 2** Title \_\_\_\_\_ Composer \_\_\_\_\_

**Comments:**

Please circle only one:

**Superior**

**Excellent**

**Very Good**

**Good**

**Fair**

Judge's Name \_\_\_\_\_