

# 2025 MUSIC TEACHER REFERENCE SHEET

To be completed by student's current instrumental teacher/tutor.

\*\*\* This information is to be treated as confidential. Teachers/Tutors are to please return this form to [woodvale.sc.enrolments@education.wa.edu.au](mailto:woodvale.sc.enrolments@education.wa.edu.au).

[woodvale.sc.enrolments@education.wa.edu.au](mailto:woodvale.sc.enrolments@education.wa.edu.au). NOT via the student/parent/caregiver.

Student's Name:

Teacher/Tutor's Name:

Instrument:

As an instrumental teacher/tutor, are you employed by IMSS, the school or privately?

IMSS  School  Private

Please indicate which (if any) of these courses you have been following with this student

Dept. of Education  AMEB  ABRSM  Trinity College

Other:

Student's practice habits:

Excellent  Good  Average  Poor

Student's attitude to instrument and practice:

Very High  High  Reasonable  Low

Can the student sing in tune?

Yes  No  Unsure

Does the student have any known dental or physical problems that may affect their ability to play a wind instrument? If so, please specify.

Comments regarding suitability for Woodvale Specialist Music Program

General comment regarding student.

Teacher/Tutor's Signature:

Date:

**Email to Enrolments Officer, Woodvale Secondary College**

