

Greater Hartford Chapter American Guild of Organists

JOLIDON FUND ♦ PRIVATE ORGAN STUDY

**INSTRUCTOR'S EVALUATION**

*(Information supplied is for committee use only.)*

**STUDENT CONTACT INFO:**

Name \_\_\_\_\_ Age \_\_\_\_\_ Date \_\_\_\_\_  
Home phone \_\_\_\_\_ Cell \_\_\_\_\_ E-mail \_\_\_\_\_

**INSTRUCTOR CONTACT INFO:**

Name \_\_\_\_\_  
Home phone \_\_\_\_\_ Cell \_\_\_\_\_ E-mail \_\_\_\_\_

Six-month study period began: \_\_\_\_ / \_\_\_\_ / \_\_\_\_, ended: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Lessons took place: \_\_\_\_ weekly \_\_\_\_ bi-weekly \_\_\_\_ monthly \_\_\_\_ other  
Duration of lessons: \_\_\_\_\_

List some of the music/materials studied:

Describe performance experiences (if any) that the student had during the period (recital, church service, etc.)

Describe the student's skill level and experience at the beginning of the study period:

Describe the student's strengths:

Areas needing improvement:

Would you recommend that this student continue organ study? Why or why not?

Additional comments:

Return completed form (PDF) by email  
to: [ben@gryk.com](mailto:ben@gryk.com)

or by US mail to:  
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New Britain, CT 06052