

Date: _____



New Student Availability Form

Please complete this form and email it to registrar@portlandconservatoryofmusic.org to be matched with an instructor at PCM

STUDENT INFORMATION:

Student Name: _____ Age: _____

Parent(s) Name: _____

Instrument(s) played: _____

How long of a lesson: 30 min. 45 min. 60 min. Unsure

How long has student studied their instrument for? _____

Describe student's ability to read music: _____

What teaching style are you looking for: _____

Style/genre student is interested in studying: _____

Phone number(s): _____

Email: _____

AVAILABILITY:

Mondays: AVAILABLE UNAVAILABLE *Times available:* _____

Tuesdays: AVAILABLE UNAVAILABLE *Times available:* _____

Wednesdays: AVAILABLE UNAVAILABLE *Times available:* _____

Thursdays: AVAILABLE UNAVAILABLE *Times available:* _____

Fridays: AVAILABLE UNAVAILABLE *Times available:* _____

Saturdays: AVAILABLE UNAVAILABLE *Times available:* _____

Sundays: AVAILABLE UNAVAILABLE *Times available:* _____

Other Info? _____

FOR OFFICE USE ONLY:

1st Teacher: _____ Sent: (1)_____ (2)_____ Response: _____

2nd Teacher: _____ Sent: (1)_____ (2)_____ Response: _____

3rd Teacher: _____ Sent: (1)_____ (2)_____ Response: _____

Notes: _____