

VOICE QUESTIONNAIRE

Name: _____

Voice Type: _____ Years of Private Vocal Study: _____

Name(s) of Voice Teacher(s): _____

Repertoire List (attach as a separate page) - Include:

- Title/Composer of solo works performed or studied
- Genre (opera, art song, oratorio, musical theater)
- Language

Performance Experience (solo singing, roles in musicals, plays, choral experience):

Instruments Played & Years of Study:

Classes in Acting and/or Dance:

Musicianship/Theory Classes (AP):

Languages Studied/Spoken: