Berklee College of Music
President's Office of Education Outreach/City Music Boston

Berklee City Music: Character Reference Form

Applicant please complete this section and print.

First Name:_____ Last Name:_____

Address:_____ City/State:_____ Zip:_____

Telephone#:_____ Email:_____

D.O.B:_____ Principal Instrument:_____

Teacher, parent or other reference qualified to comment knowledgeably on the candidate's character please complete this section. Please print.

First Name:_____ Last Name:_____

Address:_____ City/State:_____ Zip:_____

Telephone#:_____ Email:_____

How long and in what capacity have you been associated with the applicant?_____

_____

Please comment on the applicant's character and suitability for college-level study.

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Are you a Berklee alumnus/a? Yes No

Name (please print):_____ Title, if appropriate:_____

Signature:_____ Date_____

Berklee City Music Boston would like to thank you and assure you that your comments and observations regarding the applicant will remain confidential and will be of great assistance in evaluating the applicant's credentials for admission. Berklee City Music is in compliance with 201 CMR 17.00. To ensure the protection of personal information all applications are processed and confidentially contained

Return to:
City Music Field Recruitment Assistant
Berklee City Music Boston
1140 Boylston Street, MS-899 EDCOM

Boston, MA 02215