Indian University Jacobs School of Music
Office of Pre-College Programs

Guitar Academy
Fall 2016

Scheduling form

Instructions: Please give at least one option for each of the five sections. Your lesson time options should be between the times of 2:00pm and 8:30pm, Monday through Friday. Feel free to list more than one week day as well as time spans larger than the actual duration of the lesson you are registering for.

Example:
Day of the week: Monday/Thursday/Friday  
Beginning time: 3:30 p.m.  
Ending time: 7:15 p.m.

Before the beginning of the semester you will be contacted by the instructor for a final confirmation of your lesson time.

If you have any questions, please contact the director, Atanas Tzvetkov, (812) 339-0236, avtzvetk@indiana.edu.

Student's Name ____________________________ Lesson's length

1. First choice for lesson time:
   Day of the week ____________________________  Beginning time ____________  Ending time ____________
   Day of the week ____________________________  Beginning time ____________  Ending time ____________

2. Second choice for lesson time:
   Day of the week ____________________________  Beginning time ____________  Ending time ____________
   Day of the week ____________________________  Beginning time ____________  Ending time ____________

3. Third choice for lesson time:
   Day of the week ____________________________  Beginning time ____________  Ending time ____________

4. Other possibilities for lesson time:
   Day of the week ____________________________  Beginning time ____________  Ending time ____________
   Day of the week ____________________________  Beginning time ____________  Ending time ____________
   Day of the week ____________________________  Beginning time ____________  Ending time ____________

5. Unavailability:
   Day of the week ____________________________  Beginning time ____________  Ending time ____________
   Day of the week ____________________________  Beginning time ____________  Ending time ____________
   Day of the week ____________________________  Beginning time ____________  Ending time ____________