



# Young Pianist Competition of New Jersey

P.O. Box 3 ♦ Martinsville ♦ NJ 08836 ♦ Tel: 908-526-0794 ♦ Fax: 908-393-9460

E-mail: ypcnjoffice@gmail.com ♦ www.youngpianist.org

Judge: \_\_\_\_\_ Group EC: \_\_\_\_\_

_____	Final Score
<input type="checkbox"/>	Passing Score
<input type="checkbox"/>	Not Passing Score
_____	Cut off Score

## ENTIRE CONCERTO DIVISION SEMI FINAL ROUND

*Please Type or Print Clearly*

NUMBER: \_\_\_\_\_ AGE: \_\_\_\_\_ YEARS OF STUDY: \_\_\_\_\_  
*No names please (same as preliminary round)*

WORK: \_\_\_\_\_  
*Must include Name, Opus Number or BWV number, etc.*

MOVEMENTS: \_\_\_\_\_  
\_\_\_\_\_

*Please list all movements in order with Tempo Markings*

COMPOSER: \_\_\_\_\_

Technique & Expression:		Interpretation:		Performance & Ensemble:		Total:	
-------------------------	--	-----------------	--	-------------------------	--	--------	--

GENERAL COMMENTS:

JUDGE'S SIGNATURE \_\_\_\_\_