

**HARTFORD CONSERVATORY  
RECOMMENDATION FORM**  
*(Application requires two recommendations)*

Applicant Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Applying for:  Jazz & Popular Music     Music Pedagogy     Record Production  
 Music Theater     Dance Pedagogy     Dance Performance

*To be completed by person writing recommendation:*

Name \_\_\_\_\_ School or Affiliation \_\_\_\_\_

How long have you known the Applicant? \_\_\_\_\_

Please comment on the applicant's artistic ability, maturity level, ambition, determination and seriousness of purpose:

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please Return to:  
Director of Admissions  
Hartford Conservatory  
834 Asylum Avenue  
Hartford CT 06105  
860.246.2588 x12