



simply music piano

evaluation

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This form is to be used as part of an evaluation, and the information below will help to assist with the certification of your teacher. Please answer all questions clearly and accurately.

Teacher's Name: ID:

Student's Name: Age:

Email address:

Date Started: No. of Lessons: Level:

Please individually list the title of each piece learned as a part of this level

Multiple horizontal dotted lines for listing titles.

Number in Playlist

Please rate the following from 1 to 10, with 1 being an unsatisfactory result, and 10 an excellent result. Add any comment of your choice.

Is your teacher always

Punctual: [] comments:

Prepared: [] comments:

Knowledgeable: [] comments:

Responsive to questions: [] comments:

Clear and concise: [] comments:

What challenges you most in your lessons?

Please complete the following sentence. What I most like about Simply Music is:

How much time do you spend practicing each day, and do you practice at the same time each day?

How often does your teacher talk about the long-term commitment to learning piano and your relationship to this?

Please circle the appropriate response:

Have you begun the Blues Improvisation program? **Yes | No**

Have you begun the Reading Rhythm program? **Yes | No**

Do you regularly play the piano outside of practice time? **Yes | No**

Do you regularly play music with other people? If not, why not? If so, please tell us a little about this.

May we freely use your comments in our training and/or marketing materials? **Yes | No**

The above answers are my own, and represent my genuine responses to each of the questions.

Signed:

Date:

Parent to sign on student's behalf if student is a child.