The Jacobs School of Music performance halls are extraordinarily busy with recitals and events, particularly toward the end of each semester. When a recital is cancelled at the last minute, the school loses an opportunity to help manage the significant demand for hall time.

“Cancellation” hereby refers to a recital either being cancelled, or rescheduled to a new date, time, and/or location. Even if the recital is simply being rescheduled, the initial reservation is being cancelled.

A recital that has been fully approved by the instructor/committee and the Scheduling Office may be cancelled either by the student, or by the faculty member serving either as the student’s applied instructor or committee chair. Cancellation of a recital, regardless of whether the student intends to reschedule it, is achieved by submitting the Recital Cancellation Request form to the Music Scheduling Office (musched@indiana.edu).

(Note: recitals that have not been fully approved by both the instructor/committee and the Scheduling Office do not require a submission of the cancellation form. Simply contact the Scheduling Office [musched@indiana.edu], and they will be able to help cancel the recital.)

When an approved recital is cancelled less than 6 weeks (42 days) prior to the scheduled date, a cancellation fee of $90 will be charged, to reflect the burden placed on JSoM halls and resources. (For example, a recital scheduled for April 12 must be cancelled via the submission of a complete Recital Cancellation Request form on or before March 1 in order to avoid the cancellation fee.)

This cancellation fee may be waived at the request of the faculty member serving either as the student’s applied instructor or committee chair. Applied instructors and/or committee chairs requesting the cancellation of a student’s recital and the waiving of the cancellation fee need to submit the Recital Cancellation Request form.

Additionally, when a student submits the Recital Cancellation Request form, the fee may be waived when: the student scheduling the recital suffers illness or injury; faculty responsible for attending the recital have scheduling conflicts that prevent the recital from taking place; in circumstances of family bereavement or emergency; or when there are unforeseeable conflicts with Major Ensemble obligations. If you are in the unfortunate position of experiencing any of these extenuating circumstances, please communicate the situation to your instructor, and ask if they will sign your cancellation form. A faculty signature on the form designates that the faculty member verifies your reason for cancellation. The cancellation fee will not be waived if your instructor does not sign, or is not willing to verify your circumstances.

When the faculty determine that a student’s recital cannot be performed as the result of not passing one’s recital hearing, the recital will automatically be cancelled, and no cancellation fee will be charged. In such cases, it is not necessary to submit a Recital Cancellation Request form. The same applies to DM Final Project/Lecture recitals, when faculty determine that the document in question is not ready for presentation. On any day when the University cancels classes, all recitals for that day will automatically be cancelled, and no cancellation fee will be charged.

There is no acceptable reason to waive the cancellation fee if the recital is not officially cancelled until after the recital time has already passed.
Recital Cancellation Request

Please print clearly – Return to Scheduling Office, musched@indiana.edu – Incomplete forms will not be accepted.

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student University ID Number</td>
<td>IU Email Address</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Instrument/Voice Type</th>
<th>Degree</th>
</tr>
</thead>
</table>

Recital Classification (circle one):
- Junior
- Senior
- MM
- PD
- DM
- AD
- Student/Non-degree

Recital:
<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Location</th>
</tr>
</thead>
</table>

Reason for Cancellation (please explain):

Intent to Reschedule (check one):
- ☐ same semester
- ☐ future semester
- ☐ will not reschedule

Form submitted by (circle one):
- Student
- Instructor

Instructor / Committee Chair (print name): ____________________________

Instructor / Committee Chair signature: ____________________________ Date: __________

Student signature: ____________________________ Date: __________

Please note: student may be charged the $90 Recital Cancellation Fee.

*Student Bursar account to be charged 1-3 months after submitting this form.

For Office Use Only

Rcd By & Date: ____________________________ Cancellation Fee: ☐ Charged ☐ Waived

Procd By & Date: ____________________________ Comments: ____________________________