Please fill out and return ***three*** copies to your site manager.

S.E.I.B.A. ADJUDICATION FORM

Group Name_____Director_____

in Band_____ Grades Represented_____ Rehearsal schedule:_____
Total School enrollment for grades represented_____ (example: 30 minutes every other day)
Please mark one: _____Comments _____Rating _____Both

Title Composer

Selections:

_____

_____

_____

☐	TONE (Beauty, Blend, Control)
☐	INTONATION (Melodic Line, Chords, Tutti)
☐	TECHNIQUE (Articulation, Facility, Precision, Rhythm)
☐	BALANCE (Ensemble, Sectional)
☐	INTERPRETATION (Expression, Phrasing, Style, Tempo)
☐	MUSICAL EFFECT (Artistry, Fluency)
☐	OTHER FACTORS (Appearance, Discipline, Instrumentation, Selections)

Principle items will be graded I, II or III whith the possibility of pluses and minuses. Additional comments may be written on the back of this form.

_____ _____
overall rating Adjudicators Signature