

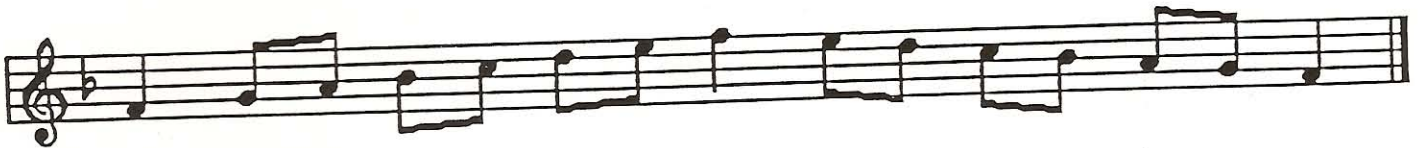
-O.C.M.E.A.  
Elementary All County Auditions

|               |       |
|---------------|-------|
| Audition Time | _____ |
| Date          | _____ |
| Room          | _____ |

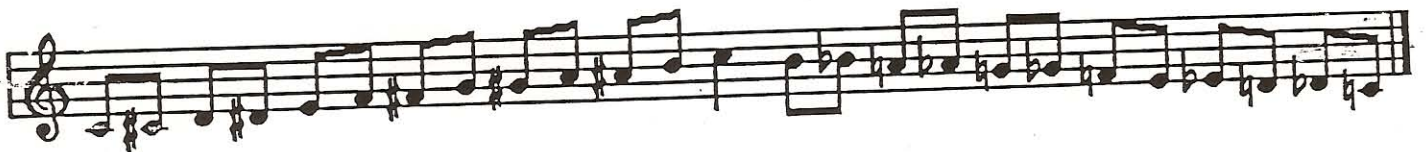
**BRASS/WOODWIND SOLO**  
INSTRUMENT: **TRUMPET**

Name of Student \_\_\_\_\_ Grade in School \_\_\_\_\_  
Name of School District \_\_\_\_\_ Teacher \_\_\_\_\_

F Scale MEMORIZED ♩ = 100 *Tongue*



Chromatic Scale MEMORIZED ♩ = 100



**ADJUDICATOR'S COMMENTS**

|                               |                          |                          |                          |                          |                          |
|-------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| SCALES                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| SCALE.....                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| CHROMATIC SCALE.....          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| SIGHT-READING                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ACCURACY OF NOTES.....        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ACCURACY OF RHYTHM.....       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ACCURACY OF ARTICULATION..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ACCURACY OF DYNAMICS.....     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

TOTAL NUMBER OF POINTS \_\_\_\_\_ Adjudicator's Signature \_\_\_\_\_