Sample Acceptance Form for Tri-M® Student Membership

Section A: To Be Completed by Chapter Advisor

Return this completed form by _________ (date) to _________________________(Chapter Advisor)

Section B: To Be Completed by the Candidate for Tri-M Student Membership

Name ___________________________________________ Grade in School_______________________
Address ______________________________________________________________________________

Member of: (Check all boxes that apply.)

☐ Band ☐ Orchestra ☐ Chorus ☐ Other __________________ (specify)

I understand that the minimum national criteria for Tri-M candidate consideration include: participation in a music class or ensemble at least one semester of this school year, a B grade or better in music and a C grade or better overall, and continued character strength that includes demonstration of service, leadership, and cooperation. I agree to maintain these minimum national criteria, and any other criteria this chapter determines, and I understand that my membership can lapse if any of these criteria are not maintained. _______(student initials)

Are you considering teaching music as a career? ☐ Yes ☐ No

New Member Assignment — Each candidate for student membership is required to either:

1. Perform an approved vocal or instrumental solo, duet, or perform in a larger ensemble before the fellow chapter members.
2. Prepare an oral or written report on a musical topic in lieu of a performance.

As my new member assignment, I agree to: (Check the appropriate box.)

☐ Perform a solo –or– ☐ Perform in an ensemble (specify ensemble type)_________________

Title _________________________________________________________________________
Composer ____________________________________________________________________
Accompanist __________________________________________________________________

☐ Prepare an oral or written report

Musical Topic _________________________________________________________________
Sources _________________________________________________________________

I understand my acceptance as a member of the Tri-M chapter at ______________________________ (school) is subject to returning this form to the chapter advisor and completing the assignment I have chosen above.

Signature of Applicant __________________________________________________________________

Signature of Parent __________________________________________________________________

,retain for chapter records)