ROLE SUBSTITUTION PROPOSAL FORM TEXAS CHRISTIAN UNIVERSITY SCHOOL OF MUSIC – VOICE DIVISION

This form must be completed and turned in no more than 30 days before the performance. All members of your committee must be present for the performance.

Name:	TCU ID#:	
Degree Program:	Role Performance Dates:	
I request appointment of the f	following faculty me	embers to serve on my Role Committee.
Major Professor:	Name	Signature
Opera Department Director:	Name	Signature
Committee Member 1:		
Committee Member 2:	Name	Signature
	Name	Signature
Composer:	Opera:	
Role:	Role timing (a	actual singing):
Language:	Performance	Location:
recitals. Roles that are appropriate singing, and a Role Committee is r	te for recital substitutio required. However, for	tudents may substitute a major operatic role for on are those which contain at least 25 minutes of actual each recital replaced by an operatic role, one c arias, and at least one recital credit must be fulfilled
	Do not complete	below this line
This role is approved for re	cital substitution.	
Major Professor Signature		Opera Department Director Signature
Division Chair Signature		