



Boardman Schools Orchestras

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 Boardman, OH 44512
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 FAX - (330) 758-7515

Orchestra Point System Practice Record Form

Please take this form to your parents, have them fill it out and sign it, and bring it back to the Orchestra Office by the due date in order to receive credit. Incomplete forms will not be acceptable. We work on the "Honor System" here, and expect you to be truthful about all aspects of this form. Thanks.

Nine Weeks Grading Period				Due Date
1st	2nd	3rd	4th	

Your Name: _____ Grade: _____

Instrument: _____ Your Orchestra: Symphony Classical Chamber Libr./Mang.

List Other Groups You Perform With on a Regular Basis: YSYO SCCO Stambaugh Band S&E
 Spartan Marching Band Other: _____

Please have your parents fill out and sign the section below. Return ASAP.

ITEM	ANSWER
Number of days per week my child practices.	___ 0 ___ 1 / 2 ___ 3 / 4 ___ 5 ___ 6 ___ 7
Minutes per day my child practices.	___ 0 ___ 15 / 20 ___ 30 ___ 40 / 45 ___ over an hour.
I find it (hard / easy) to get my child to practice.	___ Hard ___ Some Effort ___ Easy

For students with no instrument at home, practice time may be done at school during studyhalls, before and after school, and instruments may be taken home on weekends and over holidays as well.

Parental Signature _____
For Office Use Only:

Date _____

Date Rcvd.	On Time	Late	Points	