EASTMAN PATHWAYS
Student Self-Reflection Form
(Renewal Applications only)

1) How many years have you been in Pathways? _______
2) Have your lessons and classes made you more committed to your instrument now than you were when you began Pathways? Y __ N __
3) Do you feel you find the right amount of time to practice to ensure your personal growth? Y __ N __
4) This year, have you attended a concert or recital by a collegiate Eastman ensemble or student? Y __ N __
5) Have you used the Sibley Music Library by checking out music scores or listening to recordings? Y __ N __
6) I have attended one or more of the Saturday workshop or social (Careers, Holiday, Solo Fest prep etc.): Y __ N __
   A good topic to learn about would be: ________________________________
7) Please explain why you wish to continue in the Pathways program:

8) Describe the most valuable aspect of your lessons this year at the Eastman School of Music?

9) If you were part of the Practice Buddies mentoring program, what was your experience? What suggestions do you have to improve the program?

10) What aspect of your experience improved over last year?

11) How would you describe your relationship with your teacher at Eastman?

12) Please describe how this program can be improved:

13) Have any of these challenges affected your participation in Pathways?
   • Lack of transportation _____
   • Lack of concert clothing _____
   • Lack of music books or supplies _____
   • Lack of a good instrument provided by the RCSD_____  
   • Lack of knowing a) how to practice ___ b) practice time ___ c) practice space _____

14) Please rate yourself in each category from “4” (exceeds) to “1” (needs improvement).

<table>
<thead>
<tr>
<th>Category</th>
<th>4</th>
<th>3</th>
<th>2</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tone</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technique</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Musicianship</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rhythmic Skills</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reading Ability</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work Habits</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Signed _________________________________________________________________________________

Name (Please Print) ___________________________ Date____________________________