



District Chair Syllabus Report Form

Today's Date _____

Chair's Name _____ District/Area _____

Dates Syllabus Was Held _____

Number of Teachers _____

Number of Students _____

Number of Days of Adjudication _____ (Number of Schedules)

Adjudicator Names

Overall Summary — Please include any issues with adjudicators, host studios, repertoire choices, special schedule requests, late sign-ups, collecting checks, or any other issues.

Signature _____

Due within two weeks of your Syllabus. Thank you!

Mail to: Barbara Roberts, NCTM
State Syllabus Chair
503 Rhododendron Drive
Vancouver, WA 98661
robertsfm6@gmail.com