

	OPERA SUBSTITUTION REQUEST	
Student:		<del></del>
	EID:	Date

## PREVIOUS BSoM ENSEMBLE PARTICIPATION

Semester	Ensemble Grade
Approved:	
Voice Teacher	date
Approved:	
Opera Director	date
Request Approved	Request Denied
Signature:Chair of Ensembles Committee	date
Gian of Ensembles dominiteee	auce
Processed:	
Processed: Undergraduate Advisor	date
NrDegr □ SAN □ Toolkit □	