



THE YOUNG VOICES OF THE SANTA FE OPERA



The Young Voices of The Santa Fe Opera was created in January of 2008 to encourage, nurture, and guide high school students exhibiting talent, desire, and potential for singing classical music.

Program participants receive voice lessons and musical coaching by The Santa Fe Opera's music staff as well as training in diction, music theory, and basic acting.

In addition, students participate in Master Classes by visiting guest artists, attend cultural events, and have multiple opportunities to gain performance experience through studio classes, community engagement activities, and public performances.

Participation in this program is free of charge, however students are asked to commit to a regular and rigorous training process.

Since the inception of the Young Voices, seventy-two students have participated in the program and many are now pursuing further studies in prestigious music programs.

OPEN TO STUDENTS ENTERING THEIR FRESHMAN-SENIOR YEAR IN AUGUST 2019

Program is free of charge
Auditions held in Santa Fe and Albuquerque

SANTA FE

The Santa Fe Opera Ranch Lounge
Sunday, April 7 at 12:00 pm

ALBUQUERQUE

Center for the Arts at UNM
Saturday, April 13 at 3:00 pm

For questions for additional information
youngvoices@santafeopera.org

APPLICATION DUE APRIL 6, 2019





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WHO CAN APPLY

- Highly motivated students who have demonstrated a high level of interest in studying classical singing.
- Students entering the ninth through twelfth grade, however preference is given to those who can participate for 2 years in the program.
- Students should be able to commit to regular weekly lessons, designated weekend studio classes, master classes and performances. The program begins with an orientation in August and runs through May 2020.

MATERIALS TO ACCOMPANY THE APPLICATION FORM

- Letter of intent indicating your reason for applying, your specific interests, and what you hope to gain from participating in this program.
- Two recommendations completed on the forms provided; at least one of which is from a music or theater teacher or mentor. These forms can be sent directly by the author to youngvoices@santafeopera.org
- Signed Parental/Guardian agreement form.

HOW TO APPLY

Complete and return the application forms and the requested supplemental information. Applications are available online and can be downloaded and filled out:

<https://www.santafeopera.org/discover/youth/high-school-mastery-programs>

Email the completed forms to youngvoices@santafeopera.org

REVIEW PROCESS

Applicants will perform an in person audition. Please prepare one song and bring sheet music for the provided accompanist. Finalists will be notified. Each finalist MUST participate in a 20-minute interview. A maximum of fifteen students will be selected for the program. Once invited to join the program the applicant will have one week to confirm participation.





THE YOUNG VOICES OF THE SANTA FE OPERA APPLICATION

APPLICATION FORM

APPLICATIONS DUE APRIL 6, 2019

Please complete this application, and return
by e-mail to: youngvoices@santafeopera.org

NAME _____

ADDRESS _____

CITY AND ZIP _____

APPLICANT'S EMAIL ADDRESS _____

APPLICANT'S HOME PHONE _____

APPLICANT'S CELL PHONE _____

PARENT OR GUARDIAN'S NAME _____

PARENT OR GUARDIAN'S CELL PHONE _____

PARENT OR GUARDIAN'S EMAIL _____

SCHOOL (FALL 2019) _____

GRADE (FALL 2019) _____

WHAT INSTRUMENTS DO YOU PLAY? _____

DO YOU READ MUSIC? YES NO

IF YES, TO WHAT DEGREE? WELL MODERATELY WELL ONLY SLIGHTLY

WHAT IS YOUR VOICE TYPE OR WHAT PART DO YOU SING IN CHORUS? _____

VOCAL RANGE (IF KNOWN) _____

HAVE YOU HAD ANY PREVIOUS PRIVATE VOCAL INSTRUCTION? YES NO

(Please note: students enrolled in the program may not study voice privately outside the program.)

IF YES, WITH WHOM AND HOW LONG? _____

HAVE YOU STUDIED ANY FOREIGN LANGUAGES? YES NO

WHAT LANGUAGE AND FOR HOW LONG? _____





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ADDITIONAL INFORMATION: EXPERIENCE AND GOALS

LIST PERFORMANCE EXPERIENCE:

WHAT GOALS DO YOU HOPE TO ACCOMPLISH IN THE YOUNG VOICES PROGRAM?

PLEASE TELL US SOMETHING YOU WOULD LIKE US TO KNOW ABOUT YOU.

PLEASE PROVIDE US WITH THE NAME, EMAIL ADDRESS, AND RELATIONSHIP FOR A REFERENCE:





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PARENTAL/GUARDIAN APPLICATION FORM

APPLICATIONS DUE APRIL 6, 2019

I understand that _____ has applied to participate in the Santa Fe Opera's Young Voices Program and should they be accepted, they will agree to attend all lessons, studio classes, and performances, arrive on time, and participate in select enrichment activities. Students will be instructed by professionals. There is no fee for invited students to participate in this master level program.

Signature _____

APPLICANT'S AND PARENTAL / GUARDIAN PLEDGE

We affirm that all statements, personal data, and information provided on the application forms are true and accurate to the best of our knowledge. We understand that any misrepresentation or omission of material facts may result in the applicant being disqualified from the selection process or later dismissed from The Santa Fe Opera's Young Voices Program. We further agree that information about the applicant may be used for publicity purposes if they are selected for The Santa Fe Opera's Young Voices Program. If selected for the program, the applicant agrees to participate fully in all appropriate program activities and to follow all program rules and regulations. We further agree that the Santa Fe Opera Young Voices Program will be free to produce and distribute photographs, audio and video recordings, and other materials that illustrate the activities of the students participating in the Young Voices Program. We understand that the applicant alone has the responsibility for seeing that the application forms are completed and submitted. We have reviewed the application and the information provided on the forms and have determined that the applicant has parental/guardian consent to complete the application process. We understand that The Santa Fe Opera's Young Voices Program is an out of school time program, and that if selected the applicant will attend the entire the program for a minimum of one year unless there is a family emergency.

WE HAVE READ THE ENTIRE PLEDGE ABOVE AND AGREE TO ALL OF THE PROVISIONS:

APPLICANT'S FULL NAME: (Please Print) _____

APPLICANT SIGNATURE: _____ DATE _____

PARENT / GUARDIAN NAME: _____ DATE _____

PARENT / GUARDIAN EMAIL ADDRESS: _____

PHONE: _____ CELL: _____





THE YOUNG VOICES OF THE SANTA FE OPERA APPLICATION

CONFIDENTIAL TEACHER REFERENCE FORM

APPLICATIONS DUE APRIL 6, 2019

INSTRUCTIONS TO THE TEACHER:

STUDENT NAME _____

has designated you as his or her teacher or mentor. Please complete this form and return it to: youngvoices@santafeopera.org

Please complete this form and return it to: youngvoices@santafeopera.org

This form is for the confidential use by The Santa Fe Opera officials and will not be released.

1/ How long have you known and worked with this applicant?

2/ In what situations have you served as this applicant's teacher or mentor?

3/ Please evaluate this applicant in the areas below comparing him or her with similar students you have had in the past.

ATTITUDE TOWARD WORK/INITIATIVE:

Outstanding Above average Average Below Average Poor

QUALITY OF WORK / ABILITY

Excellent / learns quickly Very good / learns readily Average Below Average Poor

JUDGMENT / MATURITY

Exceptionally good Above average Average Below Average Poor

4/ What is your best judgment about this applicant's emotional maturity and stability to deal with an intensive program:

Will adapt readily to the challenges and will be a successful participant.

Should be able to succeed but will have some difficulty dealing with the stress.

This applicant may have some difficulty dealing with the stress and may not be successful.

This applicant will have great difficulty dealing with new situations and challenges.





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CONFIDENTIAL TEACHER REFERENCE FORM

(CONTINUED)

5/ Please indicate your overall judgment about this applicant:

- Very highly recommended
- Highly recommended
- Recommend with reservations
- I do not recommend this student

6/ Summary Comments: Can you tell us something about this student that is not reflected in any of the above ratings that will help us make a decision? You may attach a separate sheet if needed. Please address Responsibility, Dependability, Punctuality, Emotional Stability, Working With Others, Critical Judgment, Enthusiasm, and Professional Attitude.

TEACHER/MENTOR SIGNATURE: _____ DATE _____

TEACHER/MENTOR NAME (Printed): _____

SCHOOL OR COMPANY: _____

SCHOOL/COMPANY ADDRESS: _____

PHONE: _____ EMAIL: _____

PLEASE RETURN THIS FORM TO
youngvoices@santafeopera.org

If you have questions regarding this form or the Young Voices Program please email at the address above.

