♫ **Weekly Practice Record** ♫

**Week of \_\_\_/\_\_\_/2018**

**Special Listening Piece (to be completed EVERY week)**

Title:

Composer:

Year Composed:

Performed By:

Special Notes:

**By Ear (to be completed EVERY week)**

Title

Composer:

**Technique (Check days practiced where applicable):**

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**Review Pieces (Check Days Practiced):**

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**Current Pieces (Check Days Practiced):**

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| **Title** | **M** | **T** | **W** | **Th** | **F** | **S** | **Su** |
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**Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**