



PRIVATE STUDIO SCHEDULE SUBMISSION FORM

NAME: _____ JAG#: _____
FIRST NAME MIDDLE NAME LAST NAME

INSTRUMENT/VOICE: _____ SEMESTER: FALL SPRING YEAR: _____

UNIVERSITY E-MAIL ADDRESS: _____
PLEASE USE UNIVERSITY EMAIL ADDRESS (_____@JAGMAIL.SOUTHALABAMA.EDU)

CELL PHONE NUMBER: (_____) _____

INSTRUCTOR PREFERENCE: 1ST _____ 2ND _____

LESSON TIME PREFERENCE: 1ST _____ 2ND _____

**PLEASE BLOCK OFF ALL TIMES THAT YOU ARE NOT AVAILABLE FOR CLASS ON THE SCHEDULE BELOW.
 MAKE SURE TO NOTE WHAT ACTIVITY OR CLASS IS RENDERING YOU UNAVAILABLE AT THAT TIME. LESSON TIMES PREFERENCE IS NOT GUARANTEED AND IS AT THE DISCRETION OF THE INSTRUCTOR.**

CLASS PERIOD	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
PERIOD 1	7:00-7:45AM	7:00-7:45AM	7:00-7:45AM	7:00-7:45AM	7:00-7:45AM
PERIOD 2	8:00-8:50AM	8:00-9:15AM	8:00-8:50AM	8:00-9:15AM	8:00-8:50AM
PERIOD 3	9:05-9:55AM	9:30-10:45AM	9:05-9:55AM	9:30-10:45AM	9:05-9:55AM
PERIOD 4	10:10-11:00AM		10:10-11:00AM		10:10-11:00AM
PERIOD 5	11:15AM-12:05PM	11:00AM-12:15PM	11:15AM-12:05PM	11:00AM-12:15PM	11:15AM-12:05PM
PERIOD 6	12:20-1:10PM	12:30-1:45PM	12:20-1:10PM	12:30-1:45PM	12:20-1:10PM
PERIOD 7	1:25-2:15PM		1:25-2:15PM		1:25-2:15PM
PERIOD 8	2:30-3:20PM	2:00-3:15PM	2:30-3:20PM	2:00-3:15PM	2:30-3:20PM
PERIOD 9	3:35-4:25PM	3:30-4:45PM	3:35-4:25PM	3:30-4:45PM	3:35-4:25PM
PERIOD 10	4:40-5:30PM		4:40-5:30PM		4:40-5:30PM