



Date \_\_\_\_\_ Name \_\_\_\_\_

1. **Tone Studies** - Everyday a 1/2 Interval & an Interval Study. (ie. Tone & Tuner and De La Sonorite, triplets)

- \_\_\_\_\_  - \_\_\_\_\_

2. **Technical Studies** : **T & G** - 1,2,3,4,5,6,7,8,9,10,11,12,13,14,15,16,17    3. **Finger Exercises** I - II - III

<p><b>Scales</b></p> <p><input type="checkbox"/> - memorized</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>C G D A E B F# C#</p> <p>F Bb Eb Ab Db Gb</p> <p><input type="checkbox"/> - Major 3rds    <input type="checkbox"/> - Minor 3rds</p> <p><input type="checkbox"/> - Pentatonic    <input type="checkbox"/> - Octatonic</p>	<p><input type="checkbox"/> - <b>Chromatic</b> - ♩ =</p> <p><input type="checkbox"/> - Major    <input type="checkbox"/> - Minor</p> <p><input type="checkbox"/> - Whole Tone</p> <p><input type="checkbox"/> - Major    <input type="checkbox"/> - Minor</p>	<p>Tempo - ♩ =</p> <p>Style =</p> <p>Dynamic =</p>
<p><b>Arpeggios</b></p> <p><input type="checkbox"/> - memorized</p> <p>_____</p>	<p>C G D A E B F# C#</p> <p>F Bb Eb Ab Db Gb</p> <p>Chord Progressions:</p>	<p><input type="checkbox"/> - Major    <input type="checkbox"/> - Minor</p> <p><input type="checkbox"/> - Aug.    <input type="checkbox"/> - Dim.</p> <p><input type="checkbox"/> - 7th's    <input type="checkbox"/> - Dom. 7th</p>	<p>Tempo - ♩ =</p> <p>Style =</p> <p>Dynamic =</p>
<p><b>Etudes :</b></p> <p>_____</p> <p>_____</p> <p><b>Solos :</b></p> <p>_____</p> <p>_____</p> <p>_____</p> <p><b>Excerpts:</b></p> <p>_____</p> <p>_____</p> <p>_____</p>	<p><b>Focus Goals:</b></p> <p><input type="checkbox"/> - breathing &amp; body</p> <p>_____</p> <p><input type="checkbox"/> - tone &amp; intonation</p> <p>_____</p> <p><input type="checkbox"/> - technique &amp; rhythm</p> <p>_____</p> <p><input type="checkbox"/> - articulation</p> <p>_____</p> <p><input type="checkbox"/> - expression</p> <p>_____</p> <p><input type="checkbox"/> - study</p> <p>_____</p> <p><input type="checkbox"/> - performing</p> <p>_____</p>	<p><b>Practice To Do's &amp; Observations</b></p> <p><input type="checkbox"/> - Consistent, Joyful, Detailed, Creative</p> <p>_____</p> <p><input type="checkbox"/> -</p> <p>_____</p> <p><input type="checkbox"/> -</p> <p>_____</p> <p><input type="checkbox"/> -</p> <p>_____</p> <p><input type="checkbox"/> -</p> <p>_____</p> <p><input type="checkbox"/> -</p> <p>_____</p>	<p><u>Listening:</u></p> <p>Piece:</p> <p>Composer:</p> <p>Artist:</p> <p>Specific Listening Comments:</p>

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Date \_\_\_\_\_ Name \_\_\_\_\_

Lesson Review Notes - (due 24 hours after lesson via email)