

NAME:

PIANO PRACTICE SCHEDULE

DATE:

SIGHT READING SET _____ GR _____	<input type="checkbox"/> 1 ST <input type="checkbox"/> 2 ND <input type="checkbox"/> 3 RD REPEAT	SUN	MON	TUE	WED	THU	FRI	SAT												
	<input type="checkbox"/> ONLINE EAR TRAINING	DAILY PRACTICE RECORD																		
HANONS	<input type="checkbox"/> RHYTHMS <input type="checkbox"/> KEYS <input type="checkbox"/> LEGATO <input type="checkbox"/> STACCATO <input type="checkbox"/> ACCENT STHS	DOZEN A DAY																		
THEORY	<input type="checkbox"/> MAKE CORRECTIONS	RCM TECH					<input type="checkbox"/> AS MARKED													
TEMPO																				
TEMPO																				
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SCORES	SR	/7	SR	/7	SC	/3	SC	/3	SC	/3	CB	/2	INT	/2	PB	/4	+ -	/2	PROG	/2

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