Wichita State University
Graduate Music
Program Approval Form

To be completed within your first semester of enrollment (full-time students)
or at the completion of your first six semester hours

Name _______________________________________________     MyWSU ID ____________________
[   ] MM [Specialization______________]     [   ] MME [Specialization______________]

PERMISSION TO PURSUE

MASTER OF MUSIC
   _____ History/Literature [requires thesis and foreign language]
   _____ Theory/Composition [requires composition thesis]
   _____ Performance [instrument:_______________________ requires graduate recital]
   _____ Piano Pedagogy [requires lecture recital or professional presentation project]
   _____ Piano Accompanying [requires two accompanying recitals]
   _____ Instrumental Conducting

MASTER OF MUSIC EDUCATION
   _____ Elementary/General Music
   _____ Choral Music
   _____ Instrumental Music [emphasis: ____band; ____orchestra; ___________major instrument]
   [Conducting option is available in choral and instrumental MME with performance area & program director approval]
   _____ Voice [Recital Required]

With Advisor and Area Director approval, terminal options for the above MME degrees may include thesis, graduate recital, research seminar, conducting recital, or extra hours option. Please indicate the terminal option you tentatively plan to pursue.

This does not constitute a formal election or approval.

[ ] Thesis          [ ] Terminal Project          [ ] Extra hours option          [ ] Graduate Recital
[ ] Graduate Conducting Recital (instrumental and choral emphases only; by special approval)

   _____ Special Education [requires thesis or terminal project]

____________________________________________________________________________________

ENTRANCE ASSESSMENT TAKEN:       Month _______  Year________  Verified (Initial) __________

APPROVED [Requires signatures on all lines]

1. Graduate Faculty Advisor ___________________________ Date _____________________
2. Director of Program Area ___________________________ Date _____________________
3. Director of Graduate Studies _________________________ Date _____________________
   (OR School of Music Director)