PROGRAM OF STUDY FORM (DMA): Name_____ CONCENTRATION (major)_____ Instructions to the student and advisor:

Please fill out this form during the first semester of study. Using the graduate catalog and handbook, make a list of the courses the student will take including applied lessons and ensembles.

YEAR ONE (inclusive dates)

Fall Semester

Course #	Title	Credit Hours	Grade Earned
*MUS 600	Research Methods	3	

*Mandatory unless the student has already taken this course in a previous program, has passed the diagnostic examination, and the requirement has been waived by the Director of Graduate Studies. If so, please make a note of that fact.

Spring Semester

Course #	Title	Credit Hours	Grade Earned

YEAR TWO____(inclusive dates)

Fall Semester

Course #	Title	Credit Hours	Grade Earned

Spring Semester

Course #	Title	Credit Hours	Grade Earned

YEAR THREE _____(inclusive dates)

Fall Semester

Course #	Title	Credit Hours	Grade Earned

Spring Semester

Course #	Title	Credit Hours	Grade Earned

YEAR FOUR_____(inclusive dates)

Fall Semester

Course #	Title	Credit Hours	Grade Earned

Spring Semester

Course #	Title	Credit Hours	Grade Earned

Comprehensive Exam	Date Passed:
Student's Signature	Date:
Advisor's Signature	Date:
Director of Graduate Studies Signature	Date:

Copies to go to the student, advisor and Director of Graduate Studies.