

FINAL SEMESTER PLAN

Due Oct. 1 for Fall graduation
Due Feb. 1 for Spring Graduation
Due Jun. 1 for Summer Graduation

Name_____ Student Number_____

Degree sought_____ Concentration_____

COURSES IN PROGRESS

Course number and name

If Recital is to be completed, provide scheduled date:

If Thesis is to be completed, provide title and advisor:

**Obtain signatures of your GRADUATE FACULTY COMMITTEE:
(to consist of four members)**

Department Head or Graduate Music Advisor

Professor with whom you have studied

Professor with whom you have studied

Professor with whom you have studied

Attach Course of Study form