

REPORT OF THE GUIDANCE COMMITTEE

See the Academic Programs Catalog regarding composition of guidance committee and deadlines for its formation and for filing this report listing all degree requirements.

Name _____ Student No. A Ph.D X
Last First Middle

MSU E-Mail Address _____@msu.edu

First Semester in Doctoral Program _____ Semester Year
 Major **MUSIC EDUCATION** Instrument _____

Bachelor of MUS Music Education
 Master of MUS Music Education
Institution Year Major

DOCTORAL PROGRAM

PLEASE PRINT CLEARLY AND CLUSTER BY FIELD.

Dept.	Course No.	Semester	Title (Required)	No. CR	Dept.	Course No.	Semester	Title (Required)	No. CR	
MUS			CORE (15 cr)					APPLIED MUSIC (Lessons)		
MUS					MUS	85__				
MUS									COGNATE (9 cr)	
MUS					MUS					
MUS					MUS					
			ELECTIVES (12 cr)					Remedial History or Theory Courses (IF required)		
MUS					MUS					
MUS					MUS					
MUS					MUS					
MUS					MUS					
								Submitted:		
								Scanned/Typed:		

Approved

(Print guidance committee members' names BELOW the signature line. Signatures should be obtained at the meeting with the listed committee members.)

- _____
Committee Chairperson Mo./Day/Yr.
- _____
Mo./Day/Yr.
- _____
Mo./Day/Yr.
- _____
Cognate Mo./Day/Yr.

Course Credits: **Including** at least 24 credits of 999 ____

Comprehensive examination area: Music Education

Student Signature Mo./Day/Yr.

College of Music Associate Dean, David Rayl Mo./Day/Yr.