

FLORIDA STATE UNIVERSITY COLLEGE OF MUSIC

Application for Specialized Studies Program in Special Music Education

Name _____

Major _____ (Check one) Graduate _____ Undergraduate _____

Expected Date of Graduation _____ Local Phone _____

Address where the "Recognition of Completion" may be sent _____

Undergraduate Degree: Bachelor of Music _____ Date Awarded _____
Education/Therapy

*Institution _____

Address of Institution _____

The Specialized Studies Program in Special Music education will be issued upon satisfactory completion of a Bachelor of Music Education or Music Therapy degree and satisfactory completion of the following additional 12 semester hours:

<u>Courses</u>		Credit	Semester Taken	Grade
MUE 4391/5396	Music in Special Education	3	_____	_____
MUS 4612/5619	Psychology of Music Learning/ Behavior Modification in Music	3	_____	_____
MUY 3601/MUS 5906	Music Recreation Techniques	3	_____	_____
MUS 4905/MUE 5945	Practicum in Special Music Education	3	_____	_____

Approved:

Clifford Madsen, Coordinator of Music Education/Therapy (Date Completed)

Approved:

Director of Graduate Studies in Music or Ted Stanley (Undergraduate Director) (Date Completed)

*If the student received the Bachelor's degree from FSU, the above 12 semester hours are in addition to requirements of the Bachelor's degree.

Completed forms are to be submitted to: Undergraduate Office - Room 204 C HMU/Graduate Office - Room 204A HMU.

July 2, 2014