

Graduate Recital Approval Form

Music 298

In order to take Independent Study, complete this form, obtain the signature of your instructor and return the form to the department office. Confirm your enrollment by registering for the course on-line.

Date: _____ Fresno State Email: _____@mail.fresnostate.edu

Graduate Recital Units 3

Name: _____ Fresno State ID: _____
 Last Name First Name MI

Cell Phone: _____ Other Phone: _____

Supervision Course (Number/Title)	Music: <u> 298 </u>
Schedule # _____	Permission # _____
Will be issued _____	Will be issued _____
	Units: <u> 3 </u>

FALL SPRING SUMMER

The above student has a overall grade point average of 3.0 or higher

What type of recital is planned; Conducting, Performance, Project, please write below.

Supervising Instructor (Type or Print): _____

Signature of Supervising Instructor: _____

Signature of Graduate Coordinator: _____

Signature of Department Chair: _____