

	STUD	ENT COMF	LETES	THIS SI	DE ONL'	Y		
Select semester	SU	A	U	SP	MS	Ye	ear	
S	сноо	L OF M	USIC	JUR	Y SHE	ET		
Semester Repertory Sheet for m	y MAJOR ins	strument or vo	ice:		nam	ne of instrument		
NAME:	OSU EMAIL (name.#):							
LOCAL MAILING ADDRESS:				- (
		street			city	st	ate zip code	
PHONE:		_						
Select College of Enrollment:	GRD	ASC						
Select Pursued Degree:	PHD	DMA	MM	MA	BA	BM	BME	
Select your Major(s) & Code(s)	Musi	c Education		Music	ology	Jaz	z Stud. — Comp	
		Music Theory			Composition		Music (BA)	
			Per	formance				
List your current registration number for THIS semester.				List number of terms AT THIS LEVEL.				
HOURS OF INSTRUCTION PER	RWEEK		HOURS	OF PRAC		RWEEK		
INSTRUCTOR'S NAME								
	W	ORK STUDIE	D THIS SI	EMESTER				
COMPOSER	TITLE (If taken from a book, give title of book, incl as BK I, BK II, etc., and pages of exer			luding volumes such		CHECK IF IEMORIZED	DATE OF PUBLIC PERFORMANCE	

PLEASE FILL OUT THIS FORM COMPLETELY

INSTRUCTOR COMPLETES THIS SIDE AND FORWARDS TO APPROPRIATE OFFICE: Graduate Students to Graduate Office Undergraduate Students to Undergraduate Office

CHECK RECITAL(S) GIVEN BY STUDENT THIS SEMESTER:

TYP	<u>E</u>	DATE	<u>GRADE (if any)</u>
	Studio or Departmental		
	BME Graduation		
	BM Jr. Level		
	MA		
	BA		
CHECK APF	PROPRIATE STATEMENT FOR T	HIS SEMESTER'S WORK AND	RECOMMENDATIONS:
	Studio or department (principal instrument.	_ will be) advised by instructor to	o DROP this instrument as a
	Stay extra semester		
	Normal progress; continue sa	me registration	
	Normal advance to next level		
	Student has completed requir	ements	
	Student has been granted per	rmission to study beyond require	ements
THE MIDTE	RM GRADE (if any) REPORTED 1	TO THE STUDENT WAS	_
THE JURY F	RECOMMENDS REGISTRATION	IN FOR HOUF	RS OF EXTRA CREDIT NEXT SEMESTE
		APPROVAL: INSTRUCT	OR
JURY MEME	BERS:		Signature
		INSTRUCT	OR'S GRADE
		JURY GRA	.DE
		FINAL GRA	ADE
			DH/TM 04/18/