PROGRAM OF STUDIES FORM
Master of Music in: Music Therapy
Degree Track: Thesis

Degree will appear on final transcript and diploma as:
Program: Music Therapy
Major: Music Therapy

Name: _____ Phone: (_____) _____ - _____
FSUSN: _____Major Professor: _____
Semester Entered: _____ _____ Proposed Semester of Graduation: _____

PLACEMENT EXAM RESULT: Music Theory P / F

Major Area

Semester	Prefix	Number	Title		Credits	Grade
	MUE	5396	Music in Special Education	Choose any 10 Credits	3	
	MUY	5411	Music in Counseling		2	
	MUY	5705	Applied Music Assessment in Music Therapy/ Education		2	
	MUY	5935	Seminar – Graduate Research in Music Therapy		2	
	MUY	5305	Medical Music Therapy		3	
			Other as determined by advisor			
	MUY	5971	Thesis		6	
	MUS	8976	Thesis Defense		0	
			Minimum Total		**16**	

Other Studies in Music (as recommended by advisor)

Semester	Prefix	Number	Title	Credits	Grade

Other Studies Outside of Music (as recommended by advisor)

Semester	Prefix	Number	Title	Credits	Grade

Total Minimum Required Hours for Degree	**30**

*NOTE: MUH 5219 and MUT 5051 are remedial (or review) courses, and they do not fulfill degree requirements under any circumstances. There are no exceptions to this policy.

These courses address past curricular deficiencies and/or comprehension levels of core curricular content, as determined by proficiency examinations. Successful completion of these remedial (review) courses prepares students for graduate-level content courses in the disciplines of Music History and Music Theory.

Additional remediated coursework, in other curricular areas, may be required of a student as well -- as determined by Area faculty.

Major Professor's Signature_____ Date_____

Sr. Associate Dean's Signature_____ Date_____