School of Music — Western Michigan University
Applied Music Underenrollment Request Form

Student Name ___________________________________________ WIN __________________

Applied Studio ___________________________ Instructor _____________________________

Semester: Fall  Spring  (circle one)  Year _________  Requested number of credits _________

Student’s intended program __________________________________________________________

Student’s semester of applied study (circle which semester of study this enrollment represents):
  2000-1  2000-2  2000-3  2000-4  3000-1  3000-2  3000-3  3000-4  6000

Has student passed sophomore hearing?  Yes  No  N/A  (circle one)  If so, when? ________________

The student listed above requests permission to enroll in applied music for the requested number of credits. The procedure for seeking this approval is as follows:

1.  Student completes all information above, signs below, and presents this form to the applied music instructor to seek consent for the requested enrollment.

2.  Upon signature by the applied music instructor, student submits form to the School of Music Advising office for approval and processing. If approved, the advising office will enroll the student for the requested number of credits.

Signatures:

__________________________________________  ____________________________
Student  Date

__________________________________________  ____________________________
Applied Music Instructor  Date

__________________________________________  ____________________________
School of Music Advising Office  Date

July 2013