

**WRIGHT STATE UNIVERSITY
DEPARTMENT OF MUSIC
GRADUATE STUDIES IN MUSIC PROGRAM**

FINAL APPROVAL OF GRADUATE RECITAL AND DOCUMENT

Date _____

Student Name _____ SS# _____ - _____ - _____

Address _____ City, State, ZIP _____

Phone (_____) _____ Email _____

Degree Program (choose one):

_____ MM Mus Ed _____ MM Perf _____ MHum(Music)

Applied Area (choose one)

_____ Choral Conducting _____ Instrumental Conducting

_____ Instrument (specify: _____) _____ Piano

_____ Voice

Program Advisor(s) _____

Applied Instructor _____

A. Recital Approval:	Recital Committee certifies that recital was performed satisfactorily. <i>Attach copy of printed program to this form.</i>
	Recital date and time _____
	Recital location _____
Recital Committee	_____ (Chair) _____
	Signature _____ Date _____
	Signature _____ Date _____
	Signature _____ Date _____

B. Document Approval Document Readers certify that document was submitted and approved. <i>Submit final copy of document with reader signatures with this form. Document must conform to approved style manual, and to WSU School of Graduate Studies Style Manual.</i>

C. Submitted to Department of Music _____

Director, Graduate Studies in Music