## Lebanon Valley College • Office of the Registrar

## GRADUATION PLAN/APPLICATION FOR DEGREE MASTER OF MUSIC EDUCATION DEGREE CANDIDATES

| Student Name:   |             |                                       |             |                   |  |
|---|-------------|---------------------------------------|-------------|-------------------|--|
| Last  |             | First                                 | Middle      |                   |  |
| Name on Diploma:  |             |                                       |             |                   |  |
|   |             | as you wish it to appear on your dip. |             |                   |  |
| SSN/ID No.:   |             |                                       | VC:         |                   |  |
| Graduation Information: Year  | Month       | Adviser:                              |             |                   |  |
|   | Grad        | uation Requirements                   |             |                   |  |
| COURSES COMPLETED COUR  |             | URSES IN PROGRESS                     | COURSES TO  | IRSES TO BE TAKEN |  |
| Course Grade Semester   |             | Course                                | Course      | Semester          |  |
|   |             | Core Courses                          |             |                   |  |
|   |             | ake the following courses (15 cm      | · ·         |                   |  |
|   |             | IME 801                               | MME 801     |                   |  |
| MME 802   |             | IME 802                               | MME 802     |                   |  |
|   |             | IME 803                               | MME 803     |                   |  |
| MME 804   | N           | IME 804                               | MME 804     |                   |  |
| MME 805/806   | MME         | 805/806                               | MME 805/806 |                   |  |
|   |             | Elective Courses                      |             |                   |  |
|   |             | 'ake an additional 15 elective cr     | redits      |                   |  |
|   |             |                                       |             |                   |  |
|   |             |                                       |             |                   |  |
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|   |             |                                       |             |                   |  |
|   |             |                                       | <del></del> |                   |  |
|   | <del></del> |                                       | <del></del> |                   |  |
| Student's Signature   |             |                                       | Date:       |                   |  |
|   |             |                                       |             |                   |  |
| Adviser's Certification and Signature represents an acceptable plan for the |             |                                       |             | dent, and that it |  |
| Adviser's Signature   |             |                                       | Date:       |                   |  |
| Adviser s digitature  |             |                                       | Date.       |                   |  |
|   | (DO NOT     | WRITE BELOW THIS LINE                 | (i)         |                   |  |
| Notes:  | ·           |                                       | ,           |                   |  |
| 1000.   |             |                                       |             |                   |  |
|   |             |                                       |             |                   |  |
| Graduation Status:  |             | Cum. GPA:                             |             |                   |  |