

PROGRAM of STUDY

Please type all required information. Do not handwrite. List courses in the order they were/will be completed. Each course, directed reading, independent study, etc. should be listed on a separate line. Include only those courses that will be applied to the degree.

MASTER of MUSIC

M705

MAJOR: Music Composition

NAME: _____

OU ID: _____

COURSE PREFIX & NUMBER	COURSE NAME	HOURS	GRADE	SEMESTER & YEAR	CREDIT*
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* For OU graduate courses including Norman, Tulsa, Advanced Programs and Liberal Studies, leave this column blank. For transfer credit (including OU Health Sciences Center courses), enter the institution name in this column. For courses applied to a dual master's degree, enter **Shared** in this column.

REQUIRED COURSEWORK

At least two consecutive 16-week semesters of COMP 5020 are required. No less than 8 hours are required and no more than 9 may be applied to the degree.

MUS 5111	Bibliography and Research in Music	1			
MUS 5121	Document Proposal	1			
COMP 5020	Master's-Level Composition for Performance Majors				

Musicology/Music Literature: 6 hours from any graduate-level MUSC or MULI courses.

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Music Theory: 6 hours from any graduate-level MUTH courses (excluding MUTH 5811, MUTH 5821, and MUTK courses).

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Ensembles: 2 hours. Two semesters of participation on principal instrument or voice in appropriate section of the following: MUTE 5050, MUTE 5060, MUTE 5120, MUTE 5140, MUTE 5160, MUTE 5310, MUTE 5320, MUTE 5271-002.

		1			
		1			

Recital

GCRE 5051	Graduate Composition Recital	1			
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Electives: 2-3 hours from any graduate-level coursework as approved by the graduate liaison.

THESIS RESEARCH: 4 hours MUTH 5980 required. No more than 4 hours may be applied to the degree. A completed [Master's Thesis Topic and Committee Membership form](#) must be attached.

MUTH 5980	Research for Master's Thesis				
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TOTAL HOURS:

32 hours required

I intend to graduate in the _____ semester. I hereby request approval of my program of study as outlined above. I understand that I am responsible for reviewing the policies and procedures governing graduate study at the University of Oklahoma as published in the *Graduate College Bulletin*.

Student Signature

Date



I have reviewed the above-named student's proposed program of study and I recommend approval.

Printed Name of Graduate Liaison

Graduate Liaison Signature

Date

FOR GRADUATE COLLEGE USE ONLY:

Program effective **Summer 2023**. Semester Admitted/Re-admitted: _____

Date Checked: ____/____/____ | Timeline Begins: ____/____/____ | Hours Required: ____ | **OK** ____ **Problem** ____