

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

M710

MAJOR: Music Theory

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

MUS 5111	Bibliography and Research in Music	1			
MUS 5121	Document Proposal	1			

Music Theory: 12 hours. MUTH 5823, MUTH 5813, and 6 hours from a list maintained by the academic unit and approved by the Graduate College. Choose two graduate-level Music Theory courses: one in common practice analysis and one in 20th century analysis.

MUTH 5823	Pedagogy of Music Theory	3			
MUTH 5813	Introduction to Schenkerian Analysis	3			
		3			
		3			

Musicology: 6 hours MUSC 5000 level electives, as approved by Graduate Liaison.

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Composition: 2 hours (1 semester), as approved by Graduate Liaison.

COMP 5000	Master's-Level Secondary Composition	2			
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Advised Elective: 2-3 hour graduate-level elective as approved by the graduate liaison in MUTH (excluding MUTK courses), MUSC, or COMP.

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Music Electives: 3-4 hours (any area), as approved by graduate liaison.

THESIS RESEARCH: 4 hours required. 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** ____