Date: ____________________________

I.D. # ____________________________

Name: ____________________________ Phone: ____________________________

RebelMail Address: ____________________________

The student must supply the following information, contact all signatories, and submit the completed Senior Project Approval Form to the School of Music Office by the first day of classes in the term in which the student expects to complete the Senior Project. The student will submit a Senior Project Prospectus within the first week of the semester in which the student will complete the Senior Project.

Senior Project Advisor: ____________________________

Senior Project Proposed Title: ____________________________

Senior Project Brief Description: ____________________________

Expected Completion Date: ☐ Fall_______ ☐ Spring_______

Senior Project Prospectus Submitted: ____________________________ (Date)

Signed Approvals:

Senior Project Advisor: ____________________________ Date: __________

Academic Advisor: ____________________________ Date: __________

School of Music Director: ____________________________ Date: __________

Project Completed:

Senior Project Advisor: ____________________________ Date: __________