Application for Admission to Teacher Licensure Program in Music

Name _________________________________________ Date _____________

Local Address & Phone Number ________________________________________
___________________________________________________________________
Permanent Address & Phone Number ____________________________________
___________________________________________________________________
E-mail Address _______________________________________________________

UVM ID# ________________

Expected Date of Graduation _________________________________________

Core Courses Completed: Date, Instructor, Grade
MU 085   ________ __________________________ __________
EDSP 005________ __________________________ __________
HDSF 005________ __________________________ __________
MU 076________ __________________________ __________
MU 077________ __________________________ __________
MU 078________ __________________________ __________
MU 079________ __________________________ __________
MU 080_______ __________________________ __________

What is your applied area? __________________________

How many credits have you completed in your major concentration, at the conclusions of
this semester? _________________

I have successfully completed the Level III Audition _______ yes _______ no

Praxis I Test Scores (or alternative scores) attached _______ yes _______ no
If not, date by which they will be submitted ___________

References: Include name, address and telephone number of people not related to you we
may contact. Suggested sources are Department of Music Faculty, Arts & Science
Faculty, Education Faculty, public school teachers.

1) ________________________________________________________________
2) ________________________________________________________________
3) ________________________________________________________________

*Return application to Dr. Riley, 318 Music Building by April 1 of Sophomore Year