

APPLICATION FOR THE MUSIC EDUCATION CERTIFICATION PROGRAM

Name: _____

Date: _____

Major Instrument: _____

Cumulative GPA: _____

Other Instruments You Play: _____

Semester/Year you intend to begin certification study: _____

Current email address: _____

Home Address

Street: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Pittsburgh Address

Street: _____

City: _____ State: _____ Zip: _____

Pittsburgh Phone: _____

High School Attended

City: _____ State: _____ Zip: _____

High school activities in which you participated.

1. _____ 4. _____

2. _____ 5. _____

3. _____ 6. _____

Colleges/Universities Attended (Request official transcripts of all degrees be sent to:

Director of Student Services, Carnegie Mellon School of Music, 5000 Forbes Avenue, Pittsburgh, PA 15213)

Degree Institution _____ Major _____ Dates _____

Degree Institution _____ Major _____ Dates _____

Degree Institution _____ Major _____ Dates _____

Why do you want to enter the Music Education Certification Program?

References: Request two (2) reference letters from music class faculty.

Signature of CMU Studio teacher _____

List the names of individuals you have contacted for reference letters:

1. _____

2. _____