**Master of Music
Supplemental Application to the Department of Music**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Instrument/Voice:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Degree Program (check one): Semester of Enrollment: \_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_ Performance Classical \_\_Performance Jazz \_\_Composition \_\_Music Pedagogy**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_ Check this if you wish to take the optional Music Theory Examination**

**Additional required items. Please attach as separate files:**

**\_\_ Curriculum Vita**

**\_\_ List of solo repertoire performed**

**Please submit this supplementary application to Dr. Terry B. Ewell, MM program Director,** **tewell@towson.edu****; Towson University; 8000 York Road; Towson, MD 21252-0001**

**Education:**

**Performance Experience:**

**Teaching Experience:**

**Honors and Awards:**

**Please list your audition repertoire:**