

## **DEPARTMENTAL QUESTIONNAIRE**

## **Master of Music Education - Music Education**

Tanniy Name	riist Name		iame, mamy	
Date of Birth	(mm/dd/yyyy) App	lyTexas ID Num	ber	
Do you intend to enroll full-ti	me or part-time?	Full-time	Part-time	
Please indicate which option y	ou prefer:			
Thesis (30 credit hours	9)	Non-Thesis (36 credit hours)		
Please choose <b>ONE</b> area of er	nphasis:			
Choral				
Instrumental				
Elementary				
Are you interested in a G Available to resident degree pro	-	position?		
YES	NO			
Are you interested in app	lying for scholarships	?		
YES	NO			
How did you learn about the I	Master of Music Educatio	on program?		
TTU Website	TTU Brochure	A Profes	sor	
Poster/Flyer	Print Advertisemer	nt Other V	Vebsite	
Friend/Family Member	Graduate of the Pr	ogram		
Other:				

## Departmental Questionnaire Master of Music Education - Music Education

amily Name	Fi	rst Name		Middle Name, i	fany
Date o	Date of Birth (mm	n/dd/yyyy)	ApplyTexas I	D Number	
oorate on your a	academic interests rogram.	and profession	l al goals specific	to the Master o	f Music