## PROGRAM of STUDY Please type all required information. Do not handwrite. List courses in the order they were/will be completed. Each course, directed reading, independent study, etc. should be listed on a separate line. Include only those courses that will be applied to the degree. **MASTER** of MUSIC M724/Q483 MAJOR: Organ **CONCENTRATION:** Organ Technology NAME: OU ID: **COURSE PREFIX COURSE NAME HOURS GRADE** CREDIT\* **SEMESTER** & NUMBER & YEAR For OU graduate courses including Norman, Tulsa, Advanced Programs and Liberal Studies, leave this column blank. For transfer credit (including OU Health Sciences Center courses), enter the institution name in this column. For courses applied to a dual master's degree, enter Shared in this column CORE COURSEWORK **GRRE 5042** Graduate Recital-Master of Music Degree 2 Musicology: 3 hours. No coursework taken to remediate deficiencies determined by the student's score on the Prelim Exam may be used to fulfill this requirement. It may, however, be used as elective credit, providing it is at the 5000- or 6000-level Organ Literature: 6 hours. Two courses to be chosen from MULI 5453, 5463, or 5473. **MULI 5453** Organ Literature I: Renaissance and Baroque **MULI 5463** Organ Literature II: 1750-1900 **MULI 5473** Organ Literature III: 1900-Present History and Technique of Organ Building **MUTE 5453** History and Technique of Organ Building I 3 **MUTE 5463** History and Technique of Organ Building II 3 **MUTE 5471** Internship in Organ Building I 1 **MUTE 5472** Internship in Organ Building II 2 Applied Study in Organ: 6 hours of ORGN 5020 must be taken over at least 3 consecutive semesters ORGN 5020 Master's-Level Organ for Performance Majors 2 **ORGN 5020** Master's-Level Organ for Performance Majors 2 **ORGN 5020** Master's-Level Organ for Performance Majors Music Theory: 3 hours (excluding MUTH 5811, MUTH 5821, and Music Technology courses). 3 ELECTIVES: 3 hours. As approved by Graduate Liaison and Program Advisor. **TOTAL HOURS:** 32 hours required I intend to graduate in the semester. I hereby request approval of my program of study as outlined above. I understand that I am responsible for reviewing the policies and procedures governing graduate study at the University of Oklahoma as published in the Graduate College Bulletin. Student Signature Date GRADUATE COLLEGE I have reviewed the above-named student's proposed program of study and I recommend approval. Printed Name of Graduate Liaison **Graduate Liaison Signature** Date FOR GRADUATE COLLEGE USE ONLY: Program effective Summer 2022. Semester Admitted/Re-admitted:

| Timeline Begins:

Hours Required:

Date Checked: