



## M.M. continuing to D.M.A. Application Form

Complete and turn form in to the Graduate Administrative Assistant in 450 Murphy.

Last Name	First	Middle	Date
Current Address: Number and Street		City & State	Zip Code/Postal Code
Permanent Address: Number and Street		City & State	Zip Code/Postal Code
Phone Number	E-mail Address	(PeopleSoft) KUID (7digits)	

### Enrollment Information

### TERM

Major Field: \_\_\_\_\_ \_\_\_\_\_ Fall Year \_\_\_\_\_  
 Department: MUSIC Degree sought DMA \_\_\_\_\_ Spring  
 Plan/Code MAGF-DMA (990) Campus Lawrence \_\_\_\_\_ Summer

### Applicant's Signature

I certify that the information given in this application and is complete and accurate, and I understand that submission of incorrect information can be considered sufficient cause for terminating my application or enrollment at the University of Kansas.

Date of Application: \_\_\_\_\_ Signature: \_\_\_\_\_