



THE DOROTHY F. SCHMIDT COLLEGE OF ARTS & LETTERS  
 SCHOOL OF THE ARTS  
 DEPARTMENT OF MUSIC  
 777 Glades Road  
 Boca Raton, FL 33431  
 Telephone: 561.297.3820  
 Fax: 561.297.2944  
 Email: music@fau.edu

**DEPARTMENT OF MUSIC UNDERGRADUATE APPLICATION FORM**

Student Name: \_\_\_\_\_

Z Number: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Legal permanent home address/city/state/zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Are you a Florida resident? \_\_\_\_\_ If not, what is your residency status? \_\_\_\_\_

Instrument/s \_\_\_\_\_ # years of study \_\_\_\_\_

Teacher Recommending: \_\_\_\_\_

Current School or College: \_\_\_\_\_ ACT/SAT \_\_\_\_\_ Current GPA: \_\_\_\_\_

Have you applied to FAU?: \_\_\_\_\_ Have you been accepted? \_\_\_\_\_

Which semester and year do you plan to enter Florida Atlantic University: \_\_\_\_\_

Which degree track/s are you interested in pursuing?

Commercial Music \_\_\_\_\_ Business Track  Creative Track  Technology Track

Performance \_\_\_\_\_ Jazz Studies \_\_\_\_\_

Music Education \_\_\_\_\_ Bachelor of Arts \_\_\_\_\_

Music Minor: (Commercial Music  Instrumental Performance  Piano Performance   
 Vocal Performance  Music Education )

List solo, chamber and ensemble performance experience, as well as awards, scholarships or other recognition you have received for music. \_\_\_\_\_

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List the principal repertoire you have studied/performed. Include technical studies, vocalises, etudes, solo literature, concertos, etc. Include printed programs of performances if possible.

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Please make a brief statement regarding your career interests and goals.

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Are you applying for a Department of Music Scholarship? \_\_\_\_\_

In order to abide by the NASM Code of Ethics, please inform us of any other schools to which you have applied and confirmed attendance or for which you have accepted a scholarship offer \_\_\_\_\_

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List the two selections you will perform at the audition:

1. Composer: \_\_\_\_\_

Title: \_\_\_\_\_

2. Composer: \_\_\_\_\_

Title: \_\_\_\_\_

**AUDITION DATE:** \_\_\_\_\_ **TIME:** \_\_\_\_\_  
(CONTACT AREA ADVISOR FOR DATE AND TIME)

*Florida Atlantic University is an accredited institutional member of the National Association of Schools of Music, Florida Atlantic University encourages admission applications from qualified students regardless of color, race, religion, national origin, gender, disability, veteran status or marital status.*