UNI School of Music
Provisional Status Form

Student Name: ___________________________ Fall 20 ___ Spring 20 ___

UNI # ___________________________ Classification: ___ FR ___ SO ___ JR ___ SR

Major: _____ BA / _____ BM emphasis: ___________________________

Primary Instrument: ___________________________

Applied Instructor: ___________________________

This form must be submitted at the end of the first semester. The student must submit a completed Declaration of Curriculum Form to this application if admitted.

Admission:

_____ Admitted  _____ Not Admitted  _____ Probationary Extension (one semester only)

Comments:

________________________________________________________________

________________________________________________________________

________________________________________________________________

Signature, Applied Instructor ___________________________________ Date ________

Signature, Division Chair _________________________________________ Date ________

Undergraduate Coordinator/Advisor or Director for Undergraduate Studies

________________________________________________________________

Date __________