

### Change of Major Teacher Request

Students should be aware that a request to change applied teachers is an important decision that affects all parties involved. Applicable faculty and the Chairperson of the Department of Music will consider your request carefully and consult all parties before any action is taken. Please note that an applied faculty member is also able to request that such changes be implemented. In either case, this form must be completed.

Name of Student \_\_\_\_\_

Student's Signature \_\_\_\_\_

Date of Request \_\_\_\_\_

Major Instrument \_\_\_\_\_

Present Applied Teacher \_\_\_\_\_

Suggested New Teacher \_\_\_\_\_

Proposed Date of Change (circle one)    Fall Term    Spring Term    Other \_\_\_\_\_

Please state the reason(s) for your request and indicate if you have discussed the matter with: (1) your present teacher, proposed teacher, or division coordinator    OR    (2) the Division Coordinator and proposed new teacher.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Recommendation of Current Applied Teacher:

\_\_\_\_\_ Accept    \_\_\_\_\_ Reject    \_\_\_\_\_ (signature)

Recommendation of Division Coordinator:

\_\_\_\_\_ Accept    \_\_\_\_\_ Reject    \_\_\_\_\_ (signature)

Decision of Department Chairperson:

\_\_\_\_\_ Accept    \_\_\_\_\_ Reject    \_\_\_\_\_ (signature)

Forwarded to Assistant to the Chairperson for Implementation \_\_\_\_\_ (date)  
Copy to Student File