

## Summer 2016 Music Lessons Approval Form

**Instructions:** Please print clearly. It is the student's responsibility to obtain the required faculty signature. Course work is not to begin until signature has been obtained.

Date: \_\_\_\_\_ CU Student Number: \_\_\_\_\_

Name (last, first): \_\_\_\_\_

Local Address: \_\_\_\_\_  
City State Zip Code

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

Course Number: \_\_\_\_\_ Title: \_\_\_\_\_

Credit Hours: \_\_\_\_\_ Tuition Total (\$401 per credit): \_\_\_\_\_

Faculty Instructor Name: \_\_\_\_\_

I have read the "Student Information" for Summer Music Lessons for Music Majors. I understand that if I do not pay tuition at the time of registration, I am responsible for paying it by the deadline set by Continuing Education.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_

This student is eligible to enroll in the above course with the instructor indicated.

Faculty Name: \_\_\_\_\_ Date: \_\_\_\_\_

Faculty Signature: \_\_\_\_\_

Faculty Contact Phone Number: \_\_\_\_\_

Faculty E-mail Address: \_\_\_\_\_

\_\_\_\_\_

*To be filled out by Division of Continuing Education*

Reviewed and approved by the Extraordinary Program Manager: \_\_\_\_\_

Item Type: 211600005000