

CERTIFICATE IN JAZZ STUDIES

Student Name: _____ Student #: _____

CU Email: _____ Phone #: _____

Degree: _____ Expected Date of Graduation: _____

The signatures below certify the student is declaring a Certificate in Jazz Studies. Return signed form to the Undergraduate Studies Office (Imig, C109).

Student Signature: _____ Date: _____

Faculty Name: _____

Faculty Signature: _____ Date: _____

Courses

Term/Year Completed

MUSC 3061, Jazz Improvisation I (2 credits) Fall Spring _____

MUSC 3081, Jazz Theory and Aural Foundations (3 credits) Fall Spring _____

PMUS 1515, Jazz Piano (2 credits) Fall Spring _____

MUSC 4031, Jazz Scoring and Arranging (2 credits) Fall Spring _____

MUSC 3253, Jazz Techniques for the Music Educator (2 credits) – **BME**
 MUSC 3071 Jazz Improvisation II (2 credits) – **BM or BA** Fall Spring _____

MUSC 3642, History of Jazz (3 credits) Fall Spring _____

EMUS 3427, Jazz Ensemble (2 credits) Fall Spring _____ Fall Spring _____

EMUS 3437, Jazz Combo (2 credits) Fall Spring _____ Fall Spring _____

Students must bring this form to their graduation check-out meeting with the Undergraduate Associate Dean.