

Master of Music Performance, Composition, Pedagogy and Graduate Certificate in Applied Music

Supplemental Application to the Department of Music

Submit this application to Dr. Phillip Collister, Graduate Program Director - pcollister@towson.edu

Name:	
Pronouns (optional):	
Address:	
City:	_
State: Zip-code:	
Email:	
Phone:	
May we text you at this number? Yes No	
Semester in which you will enroll: (i.e. Fall 2025)	
Degree Program (select one from the drop down)	
List your specific instrument, voice (and voice type). Composition stin which you are most proficient.	udents also list the instrument or voice
Primary Instrument or Voice type (required)	
Secondary instrument(s) [optional]	

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