



VCU Department of Music

Secondary Instrument Approval Request

This form is used to request approval of your secondary instrument. The secondary instrument should be of a differing family than your primary instrument.

Name: _____

Student V#: _____

Secondary Instrument Requested: _____

Primary Instrument: _____

Approval Signatures (in this order)

Music Education Area Head: _____ **Date:** _____

(Prof. Coston - band; Dr. Goldie - strings, guitar)

Secondary Instrument Area Coordinator: _____ **Date:** _____

(Dr. Hammel, Dr. Wood, Dr. Zheng, or Prof. Klein)

Advisor: _____ **Date:** _____

Ms. Jones or Mr. Hendershot

Director, Music Education: _____ **Date:** _____

Dr. Goldie