

The Graduate Programs Office  
COLLEGE OF MUSIC  
**UNIVERSITY OF THE PHILIPPINES**  
Diliman, Quezon City 1101  
Philippines

**APPLICATION FOR ADMISSION TO THE GRADUATE PROGRAMS**

INSTRUCTIONS TO APPLICANT:

OR# \_\_\_\_\_

Date \_\_\_\_\_

- 1. Complete this form. Type or print clearly.
- 2. Email this form to [sdsison@up.edu.ph](mailto:sdsison@up.edu.ph) together with the **soft/scanned** copies of the following documents:

- a.) Original copy of transcript of undergraduate records (*for Master of Music program applicant*) and/or graduate records (*for Doctor of Philosophy in Music program applicant*). A cumulative grade average of 2.0 (B) or better shall be required of all applicants.
- b.) Certified copy of diploma or certificate of graduation from a Bachelor of Music program or its equivalent (*for Master of Music program applicant*) or from a Master of Music program or its equivalent (*for Doctor of Philosophy in Music program applicant*).
- c.) A creative output portfolio containing evidence of and/or scholarly accomplishments in the music field (*for Doctor of Philosophy in Music program applicant*).
- d.) Two letters of recommendation from former teachers or current supervisors (use Graduate Application Form 2).
- e.) For foreign applicants, submit proof of proficiency in English. A score of at least 500 points for paper-based (*or preferably 600 for Musicology applicants*), 173 points for computerized, or 61 points for the Internet-Based Test (IBT) in the Test of English as a Foreign Language (TOEFL) shall be required upon application.

Attach recent  
2" x 2"  
photograph

- 3. Pay the P500.00 (Foreign Students: \$20) Testing Fee. The staff in charge will email you the Bill for Payment/SOA upon completion of your documents.

Name: Ms./Mr. \_\_\_\_\_  
(Last)
(First)
(Middle/Maiden)

Mailing Address: \_\_\_\_\_  
(State or Region)
(Country)
Tel. No. \_\_\_\_\_  
Email: \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
(State or Region)
(Country)
Tel. No/s: \_\_\_\_\_  
Email: \_\_\_\_\_

Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Civil Status: \_\_\_\_\_

(If married, submit copy of Marriage Contract)

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Month/Day/Year

Citizenship: \_\_\_\_\_ Nationality: \_\_\_\_\_

Graduate Degree Program applied for (check one):  Master of Music (MM) Major: \_\_\_\_\_  
 Doctor of Philosophy in Music (Ph.D.)

Proposed Start of Graduate Study: \_\_\_\_\_  
 ( ) 1st Semester ( ) 2nd Semester AY \_\_\_\_\_

Source(s) of Financial Support: \_\_\_\_\_

Are you applying under a special arrangement or scholarship program? (IF YES, indicate collaborating university or funding agency)  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you applied to any other graduate program at any other time? (IF YES, indicate university, field of study, semester and year)  
 \_\_\_\_\_  
 \_\_\_\_\_

Academic Background (from secondary school to highest university education):

Name and address of school	Inclusive dates (month and year)	Degree Completed	Honors Obtained
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Academic Honors, Awards, Scholarships:  
 \_\_\_\_\_  
 \_\_\_\_\_

Membership in Learned Societies or Professional Organizations (indicate positions held, if any):  
 \_\_\_\_\_  
 \_\_\_\_\_

Work experience (list in chronological order)

Name and Address of Employer	Inclusive dates (month and year)	Position Held	Nature of Job
_____	_____	_____	_____
_____	_____	_____	_____

Major Performance/concerts given:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Papers published or presented at meetings, seminars and/or conferences:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

STATEMENT OF PURPOSE

Write a clear and concise 2-page essay on your purpose in applying to the graduate program and your plans for graduate study, if admitted. Include your specific area(s) of interest, an assessment of your academic, mental, and emotional preparedness for graduate study, and your future prospects. Attach additional pages if necessary.

REFERENCES

Name at least two (2) former professors or experts in your field whom you think are capable of objectively evaluating your performances and your potential for success as a graduate student and professional in your chosen field. Request these persons to complete the enclosed recommendation form, Graduate Application Form 2, and to email them directly to Dr. Raul C. Navarro, Graduate Programs Coordinator-OIC at [rcnavarro@up.edu.ph](mailto:rcnavarro@up.edu.ph)

- 1) Name: \_\_\_\_\_  
Degree and Field of Specification: \_\_\_\_\_  
Position: \_\_\_\_\_  
Name and Address of Organization: \_\_\_\_\_  
Contact Numbers/E-mail address: \_\_\_\_\_
  
- 2) Name: \_\_\_\_\_  
Degree and Field of Specification: \_\_\_\_\_  
Position: \_\_\_\_\_  
Name and Address of Organization: \_\_\_\_\_  
Contact Numbers/E-mail address: \_\_\_\_\_
  
- 3) Name: \_\_\_\_\_  
Degree and Field of Specification: \_\_\_\_\_  
Position: \_\_\_\_\_  
Name and Address of Organization: \_\_\_\_\_  
Contact Numbers/E-mail address: \_\_\_\_\_

I hereby affirm that all the above information is complete and accurate. I know that any false or misleading information given by me can make me ineligible for admission or subject to dismissal. If admitted, I agree to abide by the policies, rules and regulations of the University of the Philippines.

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Date

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Signature of Applicant

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Printed Name