

2016-17 DEPARTMENT OF ANTHROPOLOGY PROGRAM STATEMENT

Submit form to Anthropology Graduate Office by: September 19, 2016

NAME _____

STUDENT NUMBER _____

ADDRESS _____

FIELD _____

ADVISOR/SUPERVISOR _____

PHONE #: () _____

E-MAIL: _____

PROGRAM: (*circle*) M.A. M.Sc. PH.D.

Collaborative Program: (*if any*) _____

STATUS: Full-time [] Part-time [] On-campus [] Off-campus* []

***You must arrange for off-campus status with your Supervisor and the Graduate Office.**

PART A: To be completed by all graduate students:

COURSE ENROLLMENT 2016-17 (COURSES OR RST 9999Y) (*refer to handbook for program requirements*)

Course Title	Course Number	Instructor

PART B: All Master's students:

Course Requirement: 2016-17 registration will complete [] will not complete []**

If your 2016-17 registration **will not complete your course requirement, please explain: (*attach a separate sheet if necessary*)

Continued on page 2

PART C: Ph.D. Students only:

Thesis title: _____

Describe your plan to complete the following program requirements: (*attach a separate sheet if necessary*)

Course work: _____

Advisory Committee: list members: _____

Most recent Mentoring Meeting date: _____

Language Requirement: _____

Thesis proposal submission and defense date: _____

Research progress: _____

For post proposal Ph.D. students: When did your doctoral committee last meet?: _____

PART D: For All Students:

STUDENT'S SIGNATURE: _____ **Date** _____

I hereby acknowledge that I have met with this student on this date:

Advisor/Supervisor

Date

APPROVED

David Begun, Graduate Coordinator

DATE