

## MAJOR AREA PAPER (MAP) PROPOSAL FORM

Approval of MAP Topic and Supervisor

words and should describe (1) the scotthe current state of knowledge in the freference the department's MAP Guid	sal, which should be appended to this form pe and rationale for the MAP; (2) how the dield; and (3) a timeline for completion. For lelines. Students must submit this form to the ticipated submission date. MAP submission	completed MAP will contribute to additional information, please ne Director of Graduate Programs
Student Name	G Number	Date

MAP Supervisor

Anticipated submission date (Feb. 1/Sep. 1), year

## MAJOR AREA PAPER (MAP) TOPIC

Please briefly describe your Major Area Paper (MAP) topic.

## MAJOR AREA PAPER (MAP) SUPERVISOR SIGNATURE

Students should have selected a member of the CLS graduate faculty to be their primary supervisor for the MAP. The MAP supervisor can be, but does not have to be, the assigned faculty advisor. By signing below, the MAP Supervisor approves the MAP proposal attached and agrees to support the student throughout the MAP writing, submission, and revision (if required) process.

MAP Supervisor	Signature	Date

## **DEPARTMENT SIGNATURE**

By signing below, the Director of Graduate Programs approves the MAP proposal and the selected MAP Supervisor.

Director of Graduate Programs	Signature	Date