XE: Experimental Humanities & Social Engagement

MASTER’S PROJECT PROPOSAL FORM

XE Student’s Name: ____________________________
ID#: N__________________________  Email: ____________________________

Your XE Faculty Advisor: ____________________________

Master’s Project Advisor’s Name: ____________________________
Department and School: ____________________________
Email: ____________________________

Title of proposed Master’s Project: ____________________________
Semester to be completed (e.g. Fall 2020): ____________________________

Description or abstract of proposed Master’s Project:
Please attach a 300-500 word overview of your project, detailing its design and structure, its goals, and the methods you will use in realizing it.

Proposal approvals:

Master’s Project Advisor’s Signature*: ____________________________  Date: ________

*By signing this form as a Master’s Project Advisor, you are agreeing to the following:
- Work with the student to develop a timeline for completion, in which you meet regularly to offer feedback on their project.
- Approve the final Master’s Project (or not) upon its completion.
- Provide a minimum of one paragraph (approximately 300 words) of feedback, after reading the final version of the project, which will subsequently be shared with the student.

DEADLINES

<table>
<thead>
<tr>
<th>Intended Graduation Month</th>
<th>Proposal Form due</th>
<th>Master’s Project due</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td>August 16*</td>
<td>December 16*</td>
</tr>
<tr>
<td>May</td>
<td>December 16*</td>
<td>May 1*</td>
</tr>
<tr>
<td>September</td>
<td>May 1*</td>
<td>August 16*</td>
</tr>
</tbody>
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*Or the next day on which the XE office is open, should these dates fall on a weekend or holiday.

FOR MORE INFORMATION, SEE THE MASTER’S PROJECT GUIDELINES, BELOW.