APPLICATION FOR SUMMER MENTORED ADVANCED PROJECT (MAP-499)

Questions? Visit: https://www.grinnell.edu/about/leadership/offices-services/dean/maps
For deadlines see Student Dates to Remember on the Registrar's Office website
http://www.grinnell.edu/about/offices-services/registrar/calendars

NOTE: Faculty directors of summer MAPs may choose to postpone submission of Part B until the June deadline. Both faculty and students should understand the application is not complete until the completion and submission of both Part A and Part B.

Please TYPE OR PRINT legibly and Return Completed form to the Registrar's Office

Name	Student ID		Class Yr
Major(s)	Adviser Name(s)		
Oept. of Registration	Faculty Director 1	Name	
E-mail Address	Box	Is this a group MAP?	Yes No
full Project Title:			
Franscript Title (24 characters ma	aximum including spaces):		
1) Attach a separate, ty A) Wha B) How and to 2) Summer MAPs did time on-campus endea the scholarly field of the Please identify the	ner MAP Typed explanation of the relationship of this is to make this an advanced, integrative study is does this project build on your previous comethods of inquiry will contribute to the profer from those pursued during the academic avor. This allows MAP students the opportunity of the MAP, while promoting the scholarship sorts of apprenticeship-like activities that schedule of meetings with your faculty directions.	project to your previous stud; course work, and what skills, aroject. c year. The summer MAP is unity to learn more about the of the MAP director. t may be associated with the	areas of knowledge, s expected to be a full- activities associated with
•	s: (check all that apply) Mon. Tues. W		
Meeting Tim			
	hould meet with their mentors at least twic		
	product of your project (i.e. research paper its potential off-campus dissemination/eva		
Product & venue:			
		Deadline	

I. Project Check List (complete ALL items):

<u>In consultation with your faculty director</u> determine the details of the project. Attach a formal proposal which includes the following information (please use the lettered section headers below in your statement):

- A) Topic and Project Description:
 - a. a thorough description of the topic and project, written in the scholarly format appropriate to the field.
- B) Relationship of this project to your previous studies:
 - a. what makes this an advanced, integrative study.
 - b. how does this project build on your previous course work, and what skills, areas of knowledge, and methods of inquiry will contribute to the project.
- C) Sources, e.g. a bibliography.
- D) List of graded work and deadlines.

See https://www.grinnell.edu/about/leadership/offices-services/dean/maps for more detailed guidelines.

REQUIRED SIGNATURES

All signatures are required for Part A. Student and faculty director signatures are required for the separate submission of Part B

TO THE STUDENT:

NOTE: Students should refer to the current *College Catalog* to familiarize themselves with the general regulations for undertaking a MAP. Specific questions should be directed to the Associate Dean's Office or visit https://www.grinnell.edu/about/leadership/offices-services/dean/maps

Student Signature	Date	
STUDENT'S ACADEMIC ADVISER: Please read the project proposal submitted by the student. Approve the provided.	student's registration for these credits by signing in the space	
1st Adviser's Signature	Date	
2 nd Adviser's Signature	Date	
FACULTY DIRECTOR'S APPROVAL: NOTE: Directors must complete a MAP report and summer MAP ment research funding (necessary for the student to receive a summer stipenal I have carefully reviewed this MAP application. I confirm that the qual the final product will be adequate for off-campus dissemination, and the departmental policies. I understand that not more than half of the MAP that do not contribute directly to the final MAP product.	l). lity of the project description indicates a high likelihood that at this project conforms to Grinnell's MAP regulations and to	
Faculty Director's Signature	Date	
Initial here if the student is postponing the submission of the Part B	summer MAP application	
CHAIR OF THE DEPARTMENT OF REGISTRATION: I have carefully reviewed this MAP application and confirm that the proand to departmental policies. My signature below notes my approval.	oposed project conforms to Grinnell's MAP regulations	
Chair's Signature	Date	
OR OFFICE USE ONLY: SSOCIATE DEAN APPROVAL	DATE:	
ourse ID SECT	RGN	