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| **ACADEMIC & PROFESSIONAL PLANNING FORM** | | | | | | |  | | |
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| This form is designed to help graduate students and their advisors prepare for annual planning and review meetings. Using the questions below as a prompt, set an appointment with your advisor and co-advisor (if applicable) to review and finalize your plan for the coming year. Note gaps, uncertainties, and problem areas before you meet with your advisors so you can address those issues during the meeting. These plans should be considered carefully, although they can be changed during the year with the approval of your advisor/s. They will also be used at the end of the year to evaluate the adequacy of your progress during the year.  Submit the completed form to the GWSS Program Coordinator at gwss@uw.edu by 5 pm on Friday of the third week of autumn quarter. | | | | | | | | | |
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| **First Name:** | Click here to enter text. | | | | **Last Name:** | Click here to enter text. | | | |
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| **Year of Program Entry:** | | Click here to enter text. | | **Anticipated Program Completion:** | | | | Click here to enter text. | |
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| **LONG TERM GOALS** |
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| **What are your goals for the next 5 to 10 years (e.g. teaching, research, other, undecided)? Students beyond the first year should prepare an updated curriculum vita (CV). Include courses taken, courses TA’d or taught, service to the department, college, university, or community organizations, awards, publications, talks given, etc.** |
| Click here to enter text. The fields will expand as you type! |
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| **If you hope to teach, prepare a statement of teaching interests.** |
| Click here to enter text. |
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| **Prepare a statement of research interests.** |
| Click here to enter text. |
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| **What new skills or accomplishments are needed to help you achieve your goals? How can these skills or accomplishments be either acquired or improved during the current academic year?** |
| Click here to enter text. |
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| **PLANS FOR THE COMING YEAR** |
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| **Which courses will you be taking? Please note whether the course is required, provides knowledge directly related to your area of specialization, provides broad knowledge not related to your specialization or is a methods course.** |
| Click here to enter text. |
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| **Milestones: Will you be forming your supervisory committee, completing your language requirement, taking your general exams, submitting your dissertation proposal, completing your dissertation, etc.? Please list.** |
| Click here to enter text. |
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| **Research projects and writings to be initiated or completed.** |
| Click here to enter text. |
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| **Do you have professional talks planned? Please note place of presentation.** |
| Click here to enter text. |
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| **Courses you hope to TA.** |
| Click here to enter text. |
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| **Courses you would like to teach.** |
| Click here to enter text. |
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| **Other teaching practice: Will you be giving guest lectures in classes, presentations in seminars or to research/study groups? Do you have any research talks planned for GWSS’s quarterly colloquium?** |
| Click here to enter text. |
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| **List any services you are involved in, such as departmental, college, university, community, or national services. (Not required, but may be appropriate)** |
| Click here to enter text. |
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| **ANTICIPATING NEEDS & CHALLENGES** |
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| **Given your long-term goals, are you in the right training situation with the right faculty advisor?**  **If a change is needed, how can this be accomplished as simply as possible?** |
| Click here to enter text. |
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| **What type of academic mentoring do you prefer? Do you like your advisor to be hands-on with regular oversight or do you prefer more global task assignments and check-ins at the end of the task?** |
| Click here to enter text. |
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| **Think about the different arenas in which you need mentoring (teaching, research, time management, work-family relationships). Do you know people who can provide mentoring in these different arenas? Who can help you find the right mentors?** |
| Click here to enter text. |
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| **(After committee formation) Is your committee well suited to your goals? Are any changes needed?** |
| Click here to enter text. |
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| **Will faculty sabbaticals/leaves interfere with your time plan?** |
| Click here to enter text. |
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| The final draft of your plan must be signed by you and your advisor(s). Email sign-offs are acceptable. Please ensure both you and your advisor keep a copy for your records. | | | | | |
| **Student Signature:** |  | | **Date:** | Click to enter. |  |
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| **Advisor Signature:** |  | | **Date:** | Click to enter. |  |
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| **Co-Advisor Signature (if applicable):** | |  | **Date:** | Click to enter. |  |
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| **Please make sure to submit a copy of your CV with this form.** | | | | | |