

ST. MARY'S PROJECT ACTION PLAN

To be filed each semester in the Office of the Registrar by the end of the second week.

Name _____ ID Number _____

Project Discipline (department in which you are pursuing your SMP) _____

Please circle the level of SMP: 493 494

Project Title _____

Faculty Mentor(s) _____ Major _____

First Semester of SMP _____ Last Semester of SMP _____

Credit Distribution:

Sem/Yr _____ Hrs _____ : Sem/Yr _____ Hrs _____ : Sem/Yr _____ Hrs _____ : Sem/Yr _____ Hrs _____

Describe the action plan for your project this semester (e.g. literature review, development of background or research materials, methodology, presentation, etc.):

If St. Mary's Project is completed this semester, presentation format will be:

Poster SMP day _____ Other on-campus _____ (during SMP days _____ Non SMP days _____)

Off Campus (indicate time, place, venue) _____

Fill out signature page (below) and submit Action Plan to the Office of the Registrar at the time of each registration for SMP credits. This Action Plan is only valid when the student files the completed, signed copy in the Office of the Registrar no later than the last day of the schedule adjustment period.

Signature _____ Date _____
Student

Signature(s) _____ Date _____
Mentor 1

Mentor 2 (if appropriate)

Signature _____ Date _____
Adviser (First semester of SMP only)

Signature(s) _____ Date _____
Department chair of student's major 1 or study area coordinator (First semester of SMP only)

Department chair of student's major 2 (if applicable)