

## GRADUATE ACADEMIC & PROFESSIONAL PLANNING FORM

This form is designed to help graduate students and their advisors prepare for annual planning and review meetings. This is not seen as a rigid set of questions; rather the form is intended to help identify areas of academic planning that may be instrumental to your annual and long-term success. 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.

**This form must be submitted to the GWSS Program Coordinator at [gwss@uw.edu](mailto:gwss@uw.edu) by 5pm, Friday during the third week of autumn quarter.**

**Student Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Year of Program Entry:** \_\_\_\_\_ **Anticipated Program Completion:** \_\_\_\_\_

### LONG TERM GOALS

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. **Turn in your CV with this form.**

If you hope to teach, prepare a statement of teaching interests.

Prepare a statement of research interests.

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?

### PLANS FOR THE COMING YEAR

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.

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.

Please list research projects and writings to be initiated or completed.

Do you have professional talks planned? Please note place of presentation.

Please list courses you hope to TA.

Please list courses you would like to teach.

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?

Please list any services you are involved in, such as departmental, college, university, community, or national services. (Not required, but may be appropriate)

### **ANTICIPATING NEEDS & CHALLENGES**

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?

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?

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?

**(After committee formation)** Is your committee well suited to your goals? Are any changes needed?

Will faculty sabbaticals/leaves interfere with your time plan?

## SIGNATURES

The final draft of your plan needs to be signed by you and your advisor/s. **This form must be submitted to the GWSS Program Coordinator at [gwss@uw.edu](mailto:gwss@uw.edu) by 5 pm, Friday during the third week of autumn quarter.** Please make sure that you and your advisor keep a copy for your own records.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Advisor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Co-Advisor Signature (if applicable):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**\* Include a copy of your CV with this form.**