ANTHROPOLOGY GRADUATE PROGRAM
4th YEAR ACTION PLAN

Name: _________________________________________
Date: __________________________________________

Please address the questions below with bullet points.

1. **Academic Year goals.**
   What goals do you have for the academic year? What would you like to accomplish? Why is this important to your professional development? How will the timing work? How can the DGS help you achieve these goals? How can your committee help you?

2. **Conference participation.**
   Will you be attending conferences during the academic year? If so, which ones? How can you get the most out of them? How might you fund your participation from internal ND or external grants?

3. **Long-term self-reflection.**
   Thinking ahead to the next 2 years, where do you see yourself? To get to this point what major areas in your background will require further development? How can we help you to achieve these goals?

4. **Dissertation research.**
   Very briefly outline your plans for your dissertation research. How will this research further your personal and professional goals? How will this research be funded (even if tentative for the time being)? How can we help you to achieve this goal?

5. **Dissertation writing.**
   Please briefly outline your plans for writing your dissertation next year (You can do this as a month by month of your 5th year, or listing your goals for each portion of your dissertation, or any other way you want to strategically tackle the writing). What format will your dissertation have (monograph or series of articles)? How can we help you to achieve this timeline and these goals?

6. **Other.**
   Please add anything else you feel is pertinent to your academic year trajectory (goals not stated above, additional plans, or even questions and concerns).

Please set up a meeting (in person or online) with your Graduate Committee to discuss these questions. While we are aware that your time is currently consumed by your field research please take a brief moment to work on these questions, especially where you feel the gaps exist and how we can help you.

Please have your committee members electronically sign the form. Provide Michelle Thornton a hard copy by the last Friday in September. Email a copy to the DGS and your committee as well.

**Committee Signatures:**

___________________    ___________________
Name    Signature
<table>
<thead>
<tr>
<th>Name</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>