MUSICAL THEATER PROJECT
Requires approval of the Coordinator of the Shen Curriculum, based on coursework in that curriculum.

Student’s Name: ______________________________________ College: ________________________
Advisor’s Name: ______________________________________________________________________
Second Reader’s Name: ________________________________________________________________
Project Title: _________________________________________________________________________

1. Project Description, Bibliography, and Timeline

Please attach a proposal to this form that includes the following elements, developed in consultation with your advisors:

• A one-page (single-spaced) narrative description of your senior essay project. Begin with an overview and then give supporting details.
• If appropriate, a repertoire list, discography, and/or bibliography.
• A timeline for the project, including minimally (a) a specification of the form the completed project will take (including approximate length), by agreement of the student and both advisors, and (b) a specification of the portion of the work that will be completed in time for midterm feedback.

2. Project Deadlines

Monday, March 7, 2016 (5 days prior to midterm/withdrawal date) – The work product forming the basis of midterm feedback is due to the advisor.

Friday, April 29, 2016 (last day of classes) – The final written product is due to the advisor and the DUS.

3. Approval and Agreement

Student: I have prepared this proposal under the guidance of my advisor and second reader. I understand that it is my responsibility to complete the work described in this proposal and to provide it to my advisor, second reader, and DUS by the deadlines indicated above.

Advisor/Reader: I have read this proposal (including attachments), met with its author, approve of the project, understand the timeline, and agree to serve as an advisor for this senior project. I understand that we must agree on a grade and submit it to the DUS by the end of the final examination period.

Student’s Signature ___________________________ Date ___________________________
Advisor’s Signature ___________________________ Date ___________________________
Second Reader’s Signature ___________________________ Date ___________________________

THIS FORM MUST BE SUBMITTED TO THE DUS BY THE END OF COURSE SELECTION PERIOD