An Independent Study Project (ISP) or Group Independent Study Project (GISP) is not automatically granted concentration credit in East Asian Studies. Students who can make a strong case for why one might be important for his or her concentration are asked to fill out this form for pre-approval by the current Director of Graduate Studies. Please note that all GISP must be approved by the CCC. Any questions about this process may be addressed to the EAS Program Coordinator: Laura_Magee@Brown.edu.

Name _______________________________ Semester ___________________

Box # _______ Telephone # _______________ Expected Graduation ____________________________ month/ year

Courses already taken within the concentration:

Completed (with grades) or in progress ______________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Courses to be taken in future years _________________________________________________________

Tentative title of the ISP/GISP: _____________________________________________________________

1. Please attach a 1-2 page proposal that outlines the goals, rationale, readings and methods that will be adopted for this ISP/GISP. Specifically, the proposal should address the following:

• What are the goals of the ISP/GISP and the central questions or issues that it will address?

• Bearing in mind that the ISP/GISP is not meant to duplicate or significantly overlap with regular course offerings, what is the rationale for having this course count for EAS concentration credit? How does it contribute to the concentrator’s intellectual focus?

• What previous coursework in East Asian Studies has prepared you for this ISP/GISP?

2. Please also attach a detailed syllabus, outlining the works (with page numbers) that will be read over the course of the semester, the frequency with which you will meet with your advisor, and the kinds of written work or examinations that will be assessed as part of the final grade.

Concentrator’s signature _______________________________ Date____________________

I am willing to serve as the concentrator’s faculty advisor for this IS/GISP during the academic year 20___ - 20____.

Signature of Faculty Advisor _______________________________ Date____________________

Signature of Director of Undergraduate Studies _______________________________ Date_________

Please return a signed copy of this form to 54 College Street, room 102