

Date: _____

First: _____ Last: _____ Pref Name: _____ Grad Date: _____
 Banner ID: _____ Degree: _____
 2nd Concentration: _____ Dual Program: _____

REQUIRED

CORE (5)

					Semester	Year
Gateway	_____				Fall <input type="checkbox"/> Spring	_____
Junior Seminar	_____				Fall Spring	_____
Qualitative Methods	_____				Fall Spring	_____
Quantitative Methods	_____				Fall Spring	_____
Capstone	_____				Fall Spring	_____
	Seminar	Independent Study	Thesis	ESP		

TRACK (6)

	Development	Policy and Governance	Security		
Track Foundation	_____	_____	_____	Fall	Spring _____
Elective	_____	_____	_____	Fall	Spring _____
Elective	_____	_____	_____	Fall	Spring _____
Elective	_____	_____	_____	Fall	Spring _____
Elective	_____	_____	_____	Fall	Spring _____
Elective	_____	_____	_____	Fall	Spring _____

OPTIONAL - RECOMMENDED

LANGUAGE STUDY

Language: _____ Substituting (1) methods course with language study

_____	_____	Fall	Spring	_____
_____	_____	Fall	Spring	_____
_____	_____	Fall	Spring	_____
_____	_____	Fall	Spring	_____

 Student Signature Date Faculty Advisor Signature Date

OPTIONAL - RECOMMENDED

ENGAGED SCHOLAR

Yes No

For Credit Yes No

Organization

IAPA Sem _____ Fall Spring _____

ESP Sem SOC 0310 _____ Fall Spring _____

Capstone _____ Fall Spring _____

STUDY ABROAD

Yes No

Country I: _____ Institution I: _____ When: _____

Country II: _____ Institution II: _____ When: _____

BROWN IN DC

Yes No

Fall Spring _____

INTERNSHIPS

Position Title
(e.g., "Research Assistant")

Organization/Institution

Location
(City, State)

When
(e.g., "Summer 2014")

1. _____

2. _____

3. _____

4. _____

ADVISING & MENTORING INTERESTS

To help inform the choice of your faculty mentor, please identify your key areas of interest (select up to 5 using the Control key to make multiple selections).