

Graduate Student Annual Activities Report
Department of History Western
Michigan University

COVER SHEET

STUDENT: _____

Report for the year: _____

Degree sought: _____ MA Track (if applicable): _____

Admitted to program: (date) _____

SUPERVISING PROFESSOR (Thesis/Dissertation Director) _____

Comments of Supervising Professor:

By signing this cover sheet, the Supervising Professor confirms that s/he has reviewed the activities report and has discussed any academic shortcomings with and make pertinent recommendations to the student.

Signature of the Supervising Professor: _____

By signing this cover sheet, the student confirms that s/he has reviewed the comments of the Supervising Professor.

Signature of the Student: _____

Received by Director of Graduate Studies: (date) _____

Revised Nov. 2015