J.D. SUPERVISED RESEARCH APPLICATION

2017-18 Application Deadlines:

Summer 2017 Session: Thursday, May 25, 2017 by 5:00 p.m.
Fall 2017 Semester: Monday, August 28, 2017 by 5:00 p.m.
Spring 2018 Semester: Tuesday, January 16, 2018 by 5:00 p.m.

Submit this completed form to: Office of the Registrar, 315 McDonough Hall
Phone: 202-662-9220; Fax: 202-662-9235; Email: lawreg@georgetown.edu

TO: Associate Dean, J.D. Program

RE: Request for Authorization of Proposed Supervised Research

We have read the preceding Statement and Academic Policies on Supervised Research and
the Upperclass Legal Writing Requirement and agree that the attached proposal satisfies the
standards for authorizing Supervised Research. This Supervised Research will be done in the
____________________________ Semester(s) (insert Summer 2017, Fall
2017, Spring 2018, or a combination of two sequential semesters). It is understood by both
the sponsoring professor and the student seeking to complete Supervised Research that only
two (2) academic credits will be awarded for the completion of a successful project.

Student: _______________________________________
(Please print)

Professor: _______________________________________
(Please print)

_____________________________  Date: _________________
Professor's signature

Daytime telephone number: ______________________________

Email address: ______________________________________

_____________________________  Date: _________________
Student's signature

Daytime telephone number: ______________________________

Email address: ______________________________________

Go Card number: ______________________________

Expected Graduation Date: ______________________________

Have you previously registered for Supervised Research? [ ] Yes [ ] No
Proposal Title:

(Please print)

Description of the research topic and demonstration of why it will lead to an original paper satisfying the Upperclass Legal Writing Requirement; if this is a second Supervised Research project or if the student has completed a seminar paper in a similar topic area, also provide the topic and professor for the previous project:

_______________________________________________________________

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_______________________________________________________________

(You may add a separate sheet of paper describing the project, if necessary.)

Outline due date: ________________________________

First draft due date: ________________________________

Final draft due date: ________________________________

Please provide a schedule of dates for meetings between the student and the professor. Please note that these are distinct from the due dates listed above. A minimum of four dates is required and, if you list fewer than four dates below, your application may be denied for that reason.

_______________________________________________________________
About the Sponsoring Professor (check one):

[ ] Full-time
[ ] Adjunct (if adjunct, complete the rest of this form.)

Because the school's academic policy requires that "students ordinarily will seek sponsorship from full-time faculty", the Committee will not approve an adjunct faculty member for sponsorship unless the student has made a good-faith effort to obtain sponsorship by a full-time faculty member and has been unable to do so. (For a list of the full-time faculty, refer to: http://www.law.georgetown.edu/faculty/). The Committee therefore requests that you describe your efforts to obtain sponsorship by a full-time faculty member and the reasons why this was not successful. After doing so, please provide the requested additional information for the adjunct professor.

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Adjunct professor's office address: _________________________________

Adjunct professor's telephone number: ______________________________

Adjunct professor's email address: _________________________________

Is the adjunct professor sponsoring any other student's Supervised Research project during the semesters indicated above?

[ ] Yes [ ] No

TO BE COMPLETED BY THE OFFICE OF THE REGISTRAR

Verify that the student has the required "C" cumulative grade-point average:

[ ] Yes [ ] No

Indicate any seminar in a similar area:

Professor: _______________________________________________________
Course: __________________________________________________________
Semester: _________________________________________________________
Grade: __________________________________________________________
Credit-hours: _____________________________________________________

Professor: _______________________________________________________
Course: __________________________________________________________
Semester: _________________________________________________________
Grade: __________________________________________________________
Credit-hours: _____________________________________________________
[ ] Requirements satisfied [ ] Requirements not satisfied

Date: ____________________
Office of the Registrar’s signature

TO BE COMPLETED BY THE ASSOCIATE DEAN, J.D. PROGRAM

[ ] Approved [ ] Denied

Other Actions or Comments:

Date: ____________________
Associate Dean, J.D. Program’s signature