DEPARTMENT OF ECONOMICS
DIRECTED READING COURSE WORKPLAN
Econ 499
(This course is only open to junior and senior economics majors and may only be taken one time.)

The student and adviser should complete this form together. The form is due on the day the schedule is due. Return the form to Qazi Azam, 28 Hillhouse, Room l0la.

Semester: ____________

Name of Student:_____________________________________________________________

College:______________Class Year:____________Major:____________________________

Email address: _______________________________________________________________

Brief Description of the project to be undertaken. (Two or three sentences will suffice).

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Midterm Evaluation: The Yale College Course of Study Committee requires instructors to provide students with feedback on their progress by the middle of the term. Please explain how the student will receive mid-term feedback.

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____________________________________________________________________________
**Grade Calculation:** The following is a list of possible assignments or activities for the course. For each assignment that applies to you, please describe the assignment (e.g., topic, page length for a paper) and indicate the fraction of the grade the assignment will comprise, as well as the due date or the amount of time per week the student should be spending on the activity. In completing this table, keep in mind that the workload for the course must be equivalent to other Yale courses (i.e., approximately 8-12 hours per week of work).

<table>
<thead>
<tr>
<th>Assignment</th>
<th>Percent of Grade</th>
<th>Date Due or Hours Per Week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Final project <em>(Describe)</em></td>
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<td></td>
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<tr>
<td>Mid-term project <em>(Describe)</em></td>
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<tr>
<td>Assisting advisor with research <em>(This activity cannot comprise more than 50% of the grade.)</em></td>
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<td>Meeting with advisor</td>
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<tr>
<td>Presentations</td>
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<tr>
<td>Response papers</td>
<td></td>
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<tr>
<td>Other: <em>(Specify here)</em></td>
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</tr>
</tbody>
</table>

Name of Faculty Advisor_______________________________________________________

Signature of Faculty Advisor ______________________________________Date_________

*(Please note that by signing this form you are agreeing to supervise the entire course for the student. The advisor sets the syllabus, imposes the structure and determines the final grade.)*

Signature of DUS_______________________________________________Date___________