

Student Name

First Reader (last name)

Second Reader (last name)

Please place one X in each half-hour space where you will NOT be available for your project proposal conference
Include all activities planned for each of the days below (not just your class schedule). Thank you.

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	
8:00-8:30						8:00-8:30
8:30-9:00						8:30-9:00
9:00-9:30						9:00-9:30
9:30-10:00						9:30-10:00
10:00-10:30						10:00-10:30
10:30-11:00						10:30-11:00
11:00-11:30						11:00-11:30
11:30-12:00						11:30-12:00
12:00-12:30						12:00-12:30
12:30-1:00						12:30-1:00
1:00-1:30						1:00-1:30
1:30-2:00						1:30-2:00
2:00-2:30						2:00-2:30
2:30-3:00						2:30-3:00
3:00-3:30						3:00-3:30
3:30-4:00						3:30-4:00
4:00-4:30						4:00-4:30
4:30-5:00						4:30-5:00
5:30						5:30

Comments: _____

