Please use the non-shaded space to complete the form.

Date of Proposal Meeting	
Student Name (and .#)	
Anticipated Term of Graduation	
Title of Proposed Thesis	
The proposed thesis/non thesis project has been approved with the following recommendations	1
	2
	3
	4
	5
	6
Final Thesis Format: Results/Discussion or Manuscript for Targeted Journal	
Signatures	
Advisor:	
Print Name:	
Committee Member:	
Print Name:	
Student:	
Print Name:	
Please return the original form and thesis proposal to Honors Program Coordinator; 206 Atwell Hall	