

Departmental Honors Thesis Form

Name:

Date:

Student ID:

Expected Semester of Graduation:

Email address:

Thesis Advisor:

Second Reader:

Department:

Indicate Course Sequence for Departmental Honors:

_____ **REL 491**

_____ **REL 492**

_____ **300+ level course** _____ **(c0urse #)**

_____ **REL 492**

_____ **300+ level course** _____ **(c0urse #)**

_____ **300+ level course** _____ **(c0urse #)**

Briefly summarize your thesis in 4-5 sentences:

Director of Undergraduate Studies