Honors Thesis: Permission to Register

1. Student Information

Name: ___________________________  ID #: __________________  Tel: __________________

Faculty: ___________________________  E-mail: ___________________________

Student signature: ___________________________  Date: __________

2. Course Information:

Year: __________  Term: Fall ☐  Winter ☐  Spring/Summer ☐

Subject & Course #: ___________________________

Please attach a proposal containing:
- topic
- preliminary bibliography;
- tentative outline of the essay;
- working plan for the completion of the essay.

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Course #: __________  (For Department Use Only)
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3. Instructor Information:

Name: ___________________________  Signature: ___________________________

4. Honors Advisor  Signature: ___________________________  Date: __________

Once the signature has been obtained from the appropriate advisor, take this form to the undergraduate administrator in Arts 200-F.

Signature: ___________________________  Date: __________

Associate Chair for Undergraduate Studies

For Department Use only

Date of Registration: __________

Confirmation Initials: __________