

THESIS REGISTRY FORM

Name _____ Anticipated Graduation Semester _____

Thesis being completed under:

_____ **Honors** (*must be member of Prentiss M. Brown Honors Program*)

Primary Major _____ Minor _____

Concentration(s) _____

Interdisciplinary _____

OR one of items listed below – if not HONORS

_____ **Major - list name of major** _____

_____ **Minor - list name of minor** _____

_____ **Concentration - name of concentration** _____

Tentative Title of Thesis **OR** Topic (Please Print): _____

EVERYONE MUST HAVE 3 ALBION COLLEGE PROFESORS ON THEIR COMMITTEE

Principal Advisor _____
(Signature) (Please Print Name) Department

Committee Member _____
(Signature) (Please Print Name) Department

Committee Member _____
(Signature) (Please Print Name) Department

I understand that if my research involves human or animal participants that my research protocol must be reviewed and approved by the IRB or the IACUC, respectively. Details can be found in the Guidelines for Preparation and Submission of (Departmental) Honors Theses.

****Please bring a copy of your approval to Honors Coordinator.**

_____ **Initials here**

Note: In each semester if you sign up for HSP 422H thesis writing credit, you must complete a separate, lilac-colored Honor Thesis form for the Registrar.

Return this form to the Honors Coordinator, Observatory 2nd floor, Extension 0614. Revised 9.19.18