

SENIOR RESEARCH THESIS HONORS APPLICATION

Student's Name: _____ LSU ID #: _____

Local Address: _____
Street/Apt.
City, State, Zip

Major: _____ Graduation Date: _____

Telephone Number: (_____) _____ E-mail address: _____

1.) I am requesting to enter the Upper Division Honors Program in:

- | | |
|---------------------------|--------------------|
| _____ Biochemistry | _____ Microbiology |
| _____ Biological Sciences | _____ Mathematics |
| _____ Chemistry | _____ Physics |
| _____ Geology | |

2.) List below the junior/senior level courses you have taken or plan to take to earn Upper Division Honors, **including any research/thesis courses**. Next to the course, indicate the semester you took or plan to take the course.

	Course Dept.	Course Number	Semester
1			
2			
3			
4			
5			
6			

3.) Faculty Research/Thesis Director _____

4.) After speaking with your research/thesis director, write a brief paragraph describing your research project.

5.) Department Approval Signature _____ Date _____

6.) College Approval Signature _____ Date _____

7.) Honors College Signature _____ Date _____

A student must meet all requirements as indicated by the Honors College, College of Science and Major Department.

For Office Use Only:	
<input type="checkbox"/> Saved on shared drive	<input type="checkbox"/> UCOM
<input type="checkbox"/> Updated spreadsheet	Entered by: _____
<input type="checkbox"/> Sent to Honors College	Date: _____