

PLAN II THESIS REGISTRATION FORM: PART ONE

TO BE COMPLETED THE SEMESTER PRIOR TO ENROLLMENT IN COURSE

DEADLINE: the Friday BEFORE registration in April (for fall registration) or November (for spring registration).

Student: _____ UTEID: _____

Email: _____ Phone: _____

Semester you plan to begin your thesis: __ fall __ spring __ summer 20__

Semester you plan to graduate: __ fall __ spring __ summer 20__

List any second major or degree: _____

List current or completed TC 357/ TC 358 (junior seminar courses):

semester _____ year _____ professor _____

semester _____ year _____ professor _____

Topic of proposed thesis: _____

What specific courses and/or experiences led you to this topic?

Name/department of faculty member you intend to contact about supervising your thesis:

Name/department of faculty member you intend to contact about being the second reader:

Plan II Office Approval –*Student must obtain approval during meeting with Plan II Associate or Assistant Director before turning in completed form to the Plan II office.*

Associate/Assistant Director Initials: _____ Date: _____
Approved for: _____ TC 660HA _____ TC 359T (_____ entered in database)