NOTE: You must meet with the Honors Thesis Coordinator and/or the Honors Thesis Instructor before you submit this application!

Student Name (please type or print): _____________________________________________

R#: ___________________________________ TTU Email: __________________________________

Faculty member who will serve as your Thesis Director: _____________________________________

Email: ________________________________ Dept. _________________ Mail Stop: ____________

Semesters of research hours: (3 per semester) HONS 3300 Semester _______ HONS 4300 Semester _________

Major: _________________________________ Current Cumulative GPA: ______ Graduation Semester: __________

Have you participated in paid undergraduate research? ______ When? _____________________________

With whom? _______________________________ What Program? ________________________________

Writing Experience: Please list below the writing-intensive courses you have taken and the nature of the intensive writing (research paper, etc.) that you did for each.

__________________________________________________________________________________________

__________________________________________________________________________________________

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__________________________________________________________________________________________

Please respond to the following questions below or on a separate sheet of paper.

1. What is your tentative thesis project title?
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

2. What is the central research question that you plan to answer in your thesis?
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

3. What methods do you plan to use to test this question?
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

Student’s Signature: ______________________________ Date: __________

Thesis Director’s Signature: ______________________________ Date __________

HONS 3300 Instructor’s Signature: ______________________________ Date __________

Honors College Thesis Coordinator’s Signature: ______________________________ Date __________

Turn applications in to: Megan Conley, Honors Thesis Coordinator, McClellan 102A, megan.conley@ttu.edu.

Revised March 2015