

Honors Thesis Approval Form

Name _____

Class Year _____

Email address: _____

Phone _____

Primary Thesis Advisor Name: _____

2nd Thesis Advisor Name: _____

3rd Committee Member for Thesis Presentation:

Research Topic: _____

Description of work to be done:

Approvals:

Thesis Advisor #1 Signature: _____

Thesis Advisor #2 Signature: _____

Please return form to Sarah Mills upon completion: smills14@cs.rochester.edu