

# Proposal Form for Honors Senior Research Project / Creative Endeavor

Please attach this form to the front page of your proposal.

Name: \_\_\_\_\_

Student Number: \_\_\_\_\_

Local Address: \_\_\_\_\_

Email: \_\_\_\_\_@cmich.edu

Local Phone: \_\_(\_\_\_)\_\_\_\_\_ Cell Phone: \_\_(\_\_\_)\_\_\_\_\_

Project Title: \_\_\_\_\_

Advisor: \_\_\_\_\_ Phone: \_\_\_\_\_

Advisor Address: \_\_\_\_\_

Advisor Email: \_\_\_\_\_

Student will enroll in HON 499: Semester: \_\_\_\_\_ Year: \_\_\_\_\_

*Note: HON 499 is required of all students who were admitted to the Honors Program fall 2002 or later.*

Anticipated Graduation Date: Semester: \_\_\_\_\_ Year: \_\_\_\_\_

I understand that this proposal is to be completed at least two full semesters before I plan to graduate.

*Initial here* \_\_\_\_\_

I understand that my project must be completed at least one full semester before I plan to graduate.

*Initial here* \_\_\_\_\_

\_\_\_\_\_  
Student Signature / Date

\_\_\_\_\_  
Advisor Signature / Date

\_\_\_\_\_  
Honors Director Signature/ Date

## For Office Use Only:

Date proposal turned in: \_\_\_\_\_

Copy sent to student:        Y        N

Copy sent to advisor:        Y        N

Student mailed bump card:    Y        N

Original filed in cabinet:    Y        N

