Thesis Proposal Submission Form
BYU HONORS PROGRAM

Name_________________________________________Route Y ID_____________________

Email Address_____________________________Honors Funding Requested  ☐ Yes  ☐ No

Submission Date_________________________Planned Semester of Graduation____________

Major(s)_________________________________Minor(s)______________________________

Thesis Title_______________________________________________________________

_______________________________________________________________________________

Thesis Committee Members (Please print or type)

Advisor/Chair______________________________Office_______Tel.________________________

Second Reader______________________________Office_______Tel.________________________

Honors Coordinator/Other____________________Office_______Tel.________________________

Thesis Committee Approval

As members of the student’s thesis committee, we confirm that this proposal meets the following criteria:

The scope of the proposed project is appropriate.
The student clearly identifies the specific purposes, issues, or problems to which he or she is responding.
The student clearly explains where the research question or project fits in the current body of knowledge.
The proposed methods are the best approach to achieving the desired results.
Sources and citations are used correctly.
If required, the student has received, or is in the process of receiving, IRB approval.

Advisor’s signature_________________________________________ Date____________________

Second reader's signature____________________________________ Date____________________

Honors Coordinator’s signature________________________________ Date____________________

_______________________________________________________________________________

For office use only

Honors Funding Approved  ☐ Yes  ☐ No  Is international travel involved?  ☐ Yes  ☐ No

Has an electronic copy of proposal been sent to Sandra Rogers if international travel is involved?  ☐ Yes

Approval of International Travel________________________________________ Date____________________

Approval of Honors Program Director________________________________________ Date____________________