UNIVERSITY OF ARKANSAS | College of Education & Health Professions
Honors Program

Honors Thesis/Project Proposal Form

Student Information

Name: _____ ID #: _____

Major: _____ Email: _____@uark.edu

Proposed semester & year of graduation: ☐ Spring ☐ Summer ☐ Fall _____

Committee Information

Faculty Mentor: _____ Mentor Email: _____@uark.edu

Committee Member: _____

Thesis/Project Information

Thesis/Project Title: _____

_____

Will you be completing an internship for your thesis/project? ☐ Yes* ☐ No
**If yes, you must attach a letter of verification from the host company/organization.*

Compliance: *Check the box that applies to this proposal and attach a copy of approval. Approvals must be obtained prior to submission or an explanation must be provided on a separate sheet.*

Human Subjects ☐ Pending ☐ Approved/Date of Approval _____ ☐ N/A

IACUC ☐ Pending ☐ Approved/Date of Approval _____ ☐ N/A

_____
Faculty Mentor/Date

_____
Committee Member/Date

_____
Student/Date

_____
Honors Program Director/Date

08/19

Submission Deadline

Spring graduates: Dead Day of previous fall semester
Summer graduates: Dead Day of previous spring semester
Fall graduates: Final day of previous summer 2 session

Submission Instructions

Please visit our website for details on how to submit this form: coehphonors.uark.edu/current-students/forms-resources.php

All sections of the form must be completed in their entirety. The faculty mentor, committee member, and student must sign prior to submission.

If you believe that your Honors Thesis/Project qualifies for a service learning designation on your transcript, please contact the Service Learning Initiative immediately at svclrn01@uark.edu