University of New Haven Honors Program

**Honors Thesis Advisor Selection Form**

**Student Name**: Click here to enter text.

**University E-Mail**: @unh.newhaven.edu

**Major**: Click here to enter text. **Major 2**: Click here to enter text.

**Graduation Date (Fall or Spring/Year):** Click here to enter text.

**Full-Time Faculty Thesis Advisor**: Click here to enter text. **Department**: Click here to enter text.

**Tentative title/subject of your thesis**: Click here to enter text.

**Student and Thesis Advisor Agreement**

We agree to work together as thesis advisor and student.We have both reviewed the *Guidelines for the Written Thesis and Presentation,* and the advisor has reviewed the *Honors Thesis Advisor Packet* on the Honors Program website.

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| --- | --- | --- |
| Signature of Student | Date | Name (Printed) |
| Signature of Thesis Advisor | Date | Name (Printed) |
| Signature of Department Chair | Date | Name (Printed) |

**Juniors must notify the Honors Program of their Honors thesis advisor by the end of their junior year by completing this form.**