

5828 SOUTH UNIVERSITY AVENUE CHICAGO, ILLINOIS 60637

Faculty Advisor Form for the B.A. Thesis

Name:
E-mail:
ID#
Description of proposed BA Thesis:
Faculty Advisor (Printed Name):
Signature of Faculty Advisor:
Date Signed:

This signed Faculty Advisor Form must be submitted with the student's honors program application. By signing this form, the Faculty Advisor acknowledges that they have viewed the student's application, including their proposed topic and methods.