

Thesis Agreement Form

This form is due to Dr. Bingham in order to get a permit for IDH 4950.
You may deliver a hard copy to his office, or email a signed PDF to bingham@usf.edu.

Student Name

U Number

Term and Year

Include your thesis director's name, department and USF email. Note that thesis directors must be USF professors, unless a prior exception has been granted by the USF Honors College.

Faculty Name

Faculty Department

Faculty USF Email

Honors College Student:

I have carefully read the Honors College Thesis Guidebook and understand that Thesis is worth six credits, the work is expected to last two full semesters, and the schedule must be adhered to without exception. It is my responsibility to ensure that the appropriate paperwork is done and that all deadlines are met as described in the Thesis Guidebook.

Student Signature

Thesis Director:

I confirm the above named student and I have reviewed the information in the Thesis Guidebook and that I accept the responsibility of being this student's Thesis Director as detailed in the guidebook.

Faculty Signature

Comments