

EALL 493 Senior Thesis Record (required of all majors)

Due: Fall Term Friday of Week 3

Original kept by Thesis Adviser. Copy to Student. Copy to Admin. Assistant.

Name of Student: _____

Year of Graduation: _____

Thesis Adviser: _____
(signature and date)

Second Reader: _____
(signature and date)

Proposed Thesis Topic:

(Do not write below this line/ For Departmental Use Only.)

Statement of Progress: Rec's Fall Term _____ (date)
Due: Friday of Week 10 (5 pp min)

List of meetings with Primary Advisor:

Fall of Senior Year: (list of scheduled meeting dates)

Winter of Senior Year: (list of scheduled meeting dates)