SCHOOL OF PUBLIC AND ENVIRONMENTAL AFFAIRS

SPEA HONORS THESIS CONTRACT*

Student Name:______________________________________   Student ID#:_______________________

Student IU E-mail Address:_______________________________________________________________

Sponsoring Professor:___________________________________________________________________

Course (please circle one):      SPEA-A 499          SPEA-E 499           SPEA-H 499            SPEA-V 499

Course Title:   Honors Thesis_          Section#:_______________          Credit Hours:_3__

Please choose one of the following:        ☐On Campus       ☐Off Campus

Semester or session you are to be registered:_______________________________________________

Semester or session work is to be completed:_______________________________________________

Description of practicum, readings or research topic:
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Approvals: The signatures below indicate that these individuals have read this contract and approve it
as an appropriate honors thesis experience.

Student’s Signature_____________________________________________  Date___________________

Sponsoring Professor’s Signature__________________________________  Date___________________

Advisor’s Signature_____________________________________________  Date___________________

*This is a student-originated form that will become a permanent part of the student’s file. This form is
due in the SPEA Undergraduate Program Office (Room 240) prior to registration.