Senior Thesis Contract – Biology Department

Student name:		Class year:	
Research Mentor:		Major(s): Off-campus PI: (if applicable)	
2. Please explain the criteria for	evaluating the final written thes	sis.	
3. Additional comments:			
Commission of this continues confi			dande and to
those of the Biology Department.		supervise the thesis writing process to their stan	uaras ana to
NOTES:			
 Signing this form acknowledges 	s that the work for course credit	cannot be part of paid employment.	
Two semesters of UG research j biology elective (3 credits) toward		laboratory fulfills the Advanced Experience requir	ement or a
			
Student Signature	(Date)	Faculty Signature	(Date)
		Off-campus PI Signature (if applicable)	(Date)
For Biochemistry Major : Approv	al of Professor Eric Folker		
		Professor Fric Folker	(Date)