Department of Geology & Geophysics APPLICATION FOR UNDERGRADUATE THESIS RESEARCH GEOL 3999

NOTE: A separate application needs to be filled out for each semester enrolled

REQUEST DATE:

STUDENT INFORMATION

NAME:

MAJOR(S): MINOR(S): LSU ID NUMBER:

LSU GPA: OVERALL GPA:

LOCAL PHONE #:

CELL #:

EMAIL:

COURSE REQUEST

SEMESTER (FALL, SPRING, SUMMER): YEAR:

COURSE: GEOL 3999 CREDIT HOURS:

NOTE: GEOL 3999, for undergraduates with overall GPA 3.0 or greater, not enrolled in Honors College.

BACKGROUND
COURSEWORK PERTINENT TO RESEARCH AREA:
PRIIOR RESEARCH EXPERIENCE:
INTERNSHIPS:
OTHER:

RESEARCH PROPOSAL TITLE:

Attach your research proposal, including the summary, introduction, justification, and methods (no more than five pages).

With your advisor, fill out the following table.

RESEARCH OBJECTIVES	DELIVERABLES (proposal, graded reports, projects, presentations, etc)	TIMELINE	ANTICIPATED COMPLETION DATE

CONTRACT SIGNATURES:	
STUDENT NAME (PRINT):	
STUDENT SIGNATURE:	DATE:
PROFESSOR NAME (PRINT):	
PROFESSOR SIGNATURE:	DATE:
COMMITTEE MEMBERS:	
	DEPARTMENT
	_ (signature) DATE:
	_ DEPARTMENT
	_ (signature) DATE:

DO NOT FILL OUT FOR OFFICE USE ONLY

COMMENTS
Is GPA 3.0 or greater?
Has the student been enrolled previously in GEOL 3909?with?
If so, how many hours?
If so, grade(s) received?
GEOL 3999 section Course title
ADDITIONAL COMMENTS
By signing below, I agree that this student has met all requirements to enroll in this course and therefore, is able to participate in the research acknowledged above.
DATE

I authorize that all information provided on this form, including any and all personal and academic data may be shared with the LSU Department of Geology and Geophysics in order to facilitate the enrollment process for the Undergraduate Research and/or Undergraduate Research Thesis courses. This data will be securely retained indefinitely. To learn more about privacy at LSU please see the LSU Privacy Statement, www.lsu.edu/privacy.