

Honors Independent Study or Research

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**BERKS  
HONORS  
PROGRAM**

Student \_\_\_\_\_ I.D. # \_\_\_\_\_  
Course \_\_\_\_\_ Semester (check one)      \_\_ FA 20 \_\_  
Course Section \_\_\_\_\_ Credits \_\_\_\_\_      \_\_ SP 20 \_\_  
Local Address \_\_\_\_\_      \_\_ SU 20 \_\_  
Local Phone \_\_\_\_\_ E-Mail \_\_\_\_\_ @ \_\_\_\_\_

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***Please note: Registering for H-IS-or- R is a two step process. You must first enroll in the relevant course (494, 496, etc.). Second, you must complete and submit this form by the end of the third week of classes. students should submit the form to the Honors Coordinator.***

**~~COMPLETION OF THIS FORM DOES NOT REGISTER YOU FOR THE COURSE!~~**

This form should be used to provide the honors adviser a description of an honors independent study or research project and to notify the Honors program that honors credit is to be given. **THE DESCRIPTION SHOULD ADEQUATELY EXPLAIN THE NATURE OF THE WORK TO BE DONE AND CLEARLY INDICATE WHY H-CREDIT IS APPROPRIATE.**

This project includes theses research. \_\_\_\_\_

This project includes thesis writing. \_\_\_\_\_

**HONORS WORK IS TO BE SUPERVISED BY MEMBERS OF THE REGULAR FACULTY WHO HAVE PROFESSORIAL APPOINTMENTS.**

Student (signature) \_\_\_\_\_ Date \_\_\_\_\_

Name of Thesis Supervisor/Instructor (please print) \_\_\_\_\_ Title \_\_\_\_\_

Thesis Supervisor/Instructor (signature) \_\_\_\_\_ Date \_\_\_\_\_

Instructor 's Office Address \_\_\_\_\_

**To the Honors College:** Please assign H-credit to this course for this student.

Name of Honors Adviser (please print) \_\_\_\_\_

Honors Adviser (signature) \_\_\_\_\_ Date \_\_\_\_\_

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**LOCATIONS OTHER THAN UNIVERSITY PARK**

Honors Coordinator (Signature) \_\_\_\_\_

Campus Location \_\_\_\_\_

R 4/00/ah

**For Schreyer Honors College Inter Office Use Only:**

Reg \_\_\_\_\_

DB \_\_\_\_\_