



College of Arts and Sciences
Office of the Dean
1223 Oldfather Hall
P.O. Box 880312
Lincoln, NE 68588-0312

Thesis Prospectus Form

To be completed by the student with the co-advisors. Original form should be submitted to the major department. Completed forms will be forwarded to the Dean's Office by the departments.

Student's name _____ Student ID number _____

Local address _____ Local phone _____

Expected graduation date _____

Proposed thesis title _____

Please provide a one paragraph abstract of the proposed research:

Please list both advisors and in a sentence or two explain their relevance to your topic.

Co-advisor 1: _____

Co-advisor 2: _____



Statement of Advisors

- I have read the attached proposal, approve it for thesis research and agree to supervise the student's research.
- I have discussed the GPA requirements for distinction with this student and also believe this student has a reasonable chance of achieving the minimum cumulative GPA required for **any** level of distinction (i.e., 3.500).
- I have discussed with the student that the Committee determines the level of distinction by using the cumulative grade point average based on all credit hours taken at UNL prior to the beginning of the term in which the student receives his or her degree. Incomplete coursework and classes from the current term are not included in the determination of level of distinction.
- I have discussed with the student any additional policies or requirements set by the major department.

Co-Advisors:

| | | | |
|-----------|-----------------------|------------|------|
| Signature | Typed or printed name | Department | Date |
| Signature | Typed or printed name | Department | Date |

Department Chair/Director of major department:

- I confirm both people listed are authorized to advise a thesis for this major.

| | | | |
|-----------|-----------------------|------------|------|
| Signature | Typed or printed name | Department | Date |
|-----------|-----------------------|------------|------|

*If permission for writing a thesis outside major is granted, the Associate Dean for Undergraduate Education will sign as department approver.



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Thesis Evaluation Form in Support of a Degree with Distinction

To be completed by the co-advisors or department faculty group responsible for distinction evaluation and returned to 1223 Oldfather Hall with a copy of the student's thesis.

Student's Name _____

Thesis Title _____

Department _____

1. Evaluation of thesis or creative effort. Please justify your evaluation in detail and include a discussion of the strengths and weaknesses of the project. (Feel free to attach an additional page.)

Overall rating of the thesis or creative effort (*choose one*):

Excellent

Very Good

Good

Fair

Poor

2. **Evaluation of examination:** If the examination was written, a copy of the questions and answers must accompany this report. If the examination was oral, identify the areas of subject matter covered. Please comment on the strengths and weaknesses of the student's performance in either case.

Overall rating of the examination (*choose one*):

Excellent Very Good Good Fair Poor

Thesis Advisor #1 _____
Signature

Typed or printed name Department Address & Zip Date

Thesis Advisor #2 _____
Signature

Typed or printed name Department Address & Zip Date