

Honors Thesis Mentor and Project Identification

Name	ID Number	Phone	Email Address
Working Title of Honors Thesis:			
	Honors Thesis	Mentor	
Mentor's Name		 Department	
Signature		Ema	il Address
I understand I am required to take AFLS 3 proposal meeting with my thesis committe all committee members at least one week p	e. I understand that I must	provide a printed or el	
I understand I am required to hold an oral of graduation (Spring: April 1, Summer: July of my thesis to all committee members at l could result in the postponement of my def following term or I may be required to gradate, or defense meeting date may result i distinction.	1, or Fall: November 1). I east one week prior to the cense to after the deadline aduate without honors. I und	understand I must pro- defense meeting date. I and may require the pos- derstand a missed dead	vide a printed or electronic copy I understand failure to do so stponement of graduation to the Illine, thesis proposal meeting
I have read the above and agree to comp defense may be postponed if I do not foll new defense date that falls after the dead may be deferred to the following term of	low these procedures. In lline to defend within a pa	cases where postpond articular term, gradu	ement will entail selecting a ation with honors distinction
Honors Studen	t Signature	_	Date

College Waldrip Student Center (AGRI 205). An e-copy (PDF) may be submitted electronically to aflshnrs@uark.edu. When deadlines fall on a weekend, forms and accompanying documents are due the following business day. Service-Learning: If you believe that your honors project qualifies for a service learning designation on your transcript, please contact the Service Learning Initiative at

Submit this form to the Honors Program Director prior to the completion of 60 hours. Please return completed form to the Bumpers

svclrn01@uark.edu.

AFLS HP Form #1 revised 02-28-25