SENIOR PROJECT PROPOSAL FORM
Attach this completed form to your Honors Senior Proposal

I. PERSONAL INFORMATION

Student Name: _________________________________________  UTA ID#: ________________________________
Anticipated Graduation Date: _____________________________  Date Submitted: ___________________________
Major: _______________________________________________  Classification:  □  Junior  □  Senior
MavMail: _________________________________@mavs.uta.edu  Phone: __________________________________

II. PROJECT INFORMATION

Type of Project:
Consult the departmental options informational sheet to determine which options you are permitted to propose.

☐  Thesis   ☐  Group Project   ☐  Internship   ☐  Creative Project   ☐  Study Abroad   ☐  Service Learning

Project Title: ______________________________________________________________________________________
____________________________________________________________________________________

Project Faculty Mentor: __________________________________  Email: ___________________________
Faculty Mentor’s Title: __________________________________  Department: __________________________

Your faculty mentor must be a full-time, tenured/tenure-track professor or lecturer in your academic major.

III. A CO-MENTOR IS REQUIRED FOR INTS MAJORS:
If you are an INTS major, your proposal must reflect INTS methodology of research. To ensure this requirement is met, an INTS full-time faculty member must co-sign this proposal in Section VI.

Faculty Co-Mentor: __________________________________  Email: ___________________________
Co-Mentor’s Title: __________________________________

IV. PROJECT COURSE REQUIREMENTS

Students are generally able to enroll in an independent study course to complete their senior project; however, this enrollment must be initiated and approved by the student’s major. Enrollment is this course is not required. If enrolled, the course qualifies as honors credit and will count toward the 24 hours of Honors credits needed. To receive credit, students will need to complete an Honors Designation Form. If you will be enrolling in a course to complete your Senior Project, identify the course number and the semester you will complete the course.

Honors Senior Project Course: _____________________________  Semester: ____________________________

V. HONORS RESEARCH SYMPOSIUM (HRS) PRESENTATION (Required)
The HRS presentation is typically done in the graduating semester; although not always. In what semester do you plan to complete HRS? (Note—you must register for HRS with your Honors College advisor)

HRS Presentation Requirement (semester/year): ____________________________
VI. COMPLIANCE REQUIREMENTS AND SIGNATURES

The following documents must to be included with this form:

- A two-page description of the purpose and scope of your Senior Project (format must conform with the Honors College Senior Project Proposal Guidelines), and
- Relevant research compliance approval forms, if required.

If you have any questions, contact the Honors College Senior Project advisor.

Research Compliance Information: Complete the following table to ensure that all research compliance is met. You must confer with your faculty mentor to determine if research compliance is necessary.

If your research requires any of the following, attach a copy of the research compliance approval form with your proposal. **Proposals requiring approval will not be reviewed by the Honors College until the approval documentation is submitted.**

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<tr>
<th>Compliance</th>
<th>Yes</th>
<th>No</th>
<th>Date of Approval</th>
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<tr>
<td>Human Subjects (IRB)</td>
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<td>Vertebrate Animals</td>
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<td>Recombinant DNA</td>
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<td>Environmental Health and Safety Assurances (check any that apply)</td>
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<td>Biohazard Materials</td>
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<td>Controlled Substances</td>
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**Your proposal is not approved until all parties sign below.** Once approved, you will be contacted and may then enroll in your project course described in Section VI. If not approved, you will be contacted with further instructions regarding resubmission.

Student Signature ___________________________ Date __________

Faculty Mentor Signature ___________________________ Date __________

☐ I am a full-time, tenured/tenure-track faculty member or full-time lecturer

Faculty Co-Mentor Signature (If INTS, co-mentor is required) ___________________________ Date __________

☐ I am a full-time, tenured/tenure-track faculty member or full-time lecturer

Honors College Dean or Associate Dean ___________________________ Date __________

You may be entitled to know what information The University of Texas at Arlington (UT Arlington) collects concerning you. You may review and have UT Arlington correct this information according to procedures set forth in UTS 139. The law is found in sections 552.021, 552.023 and 559.004 of the Texas Government Code.