2017-2018 Honors Program Senior Thesis Contract and Checklist Faculty Reader Section

Name of Student:
Name of Faculty Reader (printed):
Department:
\square I have read the student's proposal and approve of the topic and scope of the project.
\square I agree to read a "near-final" draft of the project submitted no later than Monday of week 9 of the Thesis Completion Quarter.
\square I agree to make timely revision recommendations to the student after reviewing the draft.
\square I agree to read the final draft of the project and view the visual element.
$\hfill \square$ I agree to confer with the Thesis Director on the final project evaluation and make recommendations as indicated.
I am a \square full-time or \square part-time faculty member at DePaul University.
Faculty Reader Signature: Date: