

Date \_\_\_\_\_

Effective Term \_\_\_\_\_

**Hollins University**  
***Thesis Application***

**Circle One: 480 (Thesis) or 490 (Honors Thesis)**

Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Student ID \_\_\_\_\_ Class Year \_\_\_\_\_ Major(s) \_\_\_\_\_

Name Thesis Director \_\_\_\_\_

Title \_\_\_\_\_  
(Final thesis title will appear on the transcript in its entirety at the completion of the project)

Description of Academic Work Required:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Signature of Thesis Director

\_\_\_\_\_  
Signature of Advisor

***THIS FORM MUST BE COMPLETED BEFORE YOU CAN REGISTER FOR  
THE SENIOR THESIS (Copy needed for each term)***

For Registrar's Office Use: Subject \_\_\_\_\_ Number \_\_\_\_\_ Section \_\_\_\_\_ CRN \_\_\_\_\_