

# HONORS THESIS COMPLETION FORM

To graduate with Latin honors, you must complete this form and submit it, along with one bound copy of your thesis, to the University Honors Program office, 20 Nicholson Hall, *by the last day of instruction of the semester in which you are graduating.*

Faculty signatures certify that the specified Honors thesis and associated work have been completed satisfactorily.

**RETURN TO:**

University Honors Program  
20 Nicholson Hall  
216 Pillsbury Dr SE  
Minneapolis, MN 55455  
Tel: 612-624-5522  
Fax: 612-626-7314  
E-mail: honors@umn.edu

STUDENT INFORMATION	
Name (first, middle initial, last)	University ID number
U of M e-mail address	College
Major(circle Honors major if pursuing more than one major)	Term of graduation (ex. spring 2009)
Thesis title	

TO BE COMPLETED BY THESIS ADVISOR	
Thesis is approved for: <input type="checkbox"/> <i>cum laude</i> <input type="checkbox"/> <i>magna cum laude</i> <input type="checkbox"/> <i>summa cum laude</i>	Date of oral exam (required only for summa)
Faculty thesis advisor name (please print)	Department
<hr/> Faculty thesis advisor signature <span style="float: right;">Date</span>	

FOR SUMMA-LEVEL THESES ONLY (or as required by academic department)	
Second reader name (please print)	Department
<hr/> Second reader signature <span style="float: right;">Date</span>	
Third reader name (please print)	Department
<hr/> Third reader signature <span style="float: right;">Date</span>	