

Individualized Interdepartmental Major Research Honors Thesis Report Form

Student Name: _____
Last Name First Name M.I.

UR ID: _____

Research Honors Project Title:

Results (Please check one):

Research Honors

No Research Honors

The undersigned, having examined the above candidate and their thesis, certify that the above information is correct and that all requirements attendant to the Interdepartmental Research Honors Program have been fulfilled or have not been fulfilled.

Faculty Advisor Signature: _____ **Date:** _____

Second Reader Signature: _____ **Date:** _____

**Please return this form to Amy Fisher, Coordinator of the Individualized
Interdepartmental Major Program, at amy.fisher@rochester.edu.**

Due by early May of the year the student is graduating.