



# Department of History

## Honors Thesis Enrollment Form

**Date:** \_\_\_\_\_ **For:** \_\_\_\_\_ **Term** \_\_\_\_\_ **Year** \_\_\_\_\_

**Student's Name:** \_\_\_\_\_ **UID:** \_\_\_\_\_

**Course requested:** 4996 **Hours credit:** 3

**Description of proposed honors thesis:**

**Expected Completion Date:**

**Student's Signature:**

**Major Professor's Signature:**

**History Honors Director Signature:**

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### For Administrative Use

**Section number:**

**CRN:**

**Issued By:**

**Date:**