PROVOST’S SCHOLARS PROGRAM
SENIOR RESEARCH PROJECT

Instructions: Students must deliver a signed copy of this form to the Honors College, ADM 241 and email a copy of their completed research project to hon-scanning@usf.edu prior to receiving a final grade.

Student Name ________________________ USF ID ______________________

I plan to graduate (Month/Year) _______________________________

This research project fulfills course #_____________ for _____________ credit hours.

Title of Research Project: ____________________________________________

- Grade: ______________________
  A = Superior
  B = Excellent
  C = Passing
  D or F = Unacceptable

- Research Project approved:

  ___________________________________________________________ / ______
  Research Project Director - Print & Sign Date

☐ Check this box if you do NOT wish your Research Project to be showcased on the Honors College website.

Completed Research Project Approval Form submitted to Honors College: ____________ Date

________________________________________________________________________ / ____________
  Received by: Date

One electronic copy emailed to hon-scanning@usf.edu: ________________________ Date