HONORS UNDERGRADUATE RESEARCH OR CREATIVE PROJECT
DIRECTED STUDY PROPOSAL FORM (HON4990)

Please return all required forms by the end of the third week of classes to the Honors College
(Rm 2100 UGL)

Term: ____________________________

Student Name: ____________________________
Self-reported GPA: ______________

9 Digit WSU ID: ____________________________
ACCESS ID: ____________________________

WSU e-mail: ____________________________

Phone number: ____________________________

Faculty Mentor
Name: ____________________________

Title (check one) ____________________________
☐ Assistant Professor
☐ Associate Professor
☐ Professor
☐ Lecturer
☐ Senior Lecturer

Department: ____________________________

WSU e-mail: ____________________________

Phone number: ____________________________

PROPOSAL

Each proposal--written, typed and submitted by the student and reviewed and endorsed by the faculty mentor--should be roughly 500 words in length. It must include proper citation for any sources referenced in the proposal and must include the following headings:

For Research Projects

1. Research Problem (What central question, issue or need does this project address?)
2. Project Description (Describe the project hypothesis and research methods. Describe how the research results will be presented: report, paper, exhibition, etc.)

For Creative Projects

1. Project Goal (What new work will this project generate?)
2. Project Description (Describe how this project will be developed and evaluated. Describe how the material developed will be presented: report, paper, performance, exhibition, etc.)
Commitment to Project Completion:
I agree to complete the research or creative project described in the attached proposal. I understand that the arrangement may be altered or cancelled during the course of the semester with the consent of all parties involved (instructor, student and Honors College advisor).

Student’s Signature: ________________________________________________________
Date: ______________________________________________________________________

Instructor’s Signature: _________________________________________________________
Date: _______________________________________________________________________

Irvin D. Reid Honors College Advisor’s Signature: ________________________________
Date: _______________________________________________________________________

For office use only:

<table>
<thead>
<tr>
<th>Date received:</th>
<th>Entered into Advisor Spreadsheet:</th>
<th>GPA Confirmation:</th>
<th>Revision Request Date:</th>
<th>Evaluation:</th>
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