

## Thesis Registration Form

Due to the Graduate Coordinator during the regular registration period

**Choose one:**                    698A First Semester                    698B Second Semester

Student First & Last Name: \_\_\_\_\_ UT EID: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Semester of registration:                    Fall                    Spring                    Summer    Year: \_\_\_\_\_

Planned graduation date:                    Fall                    Spring                    Summer    Year: \_\_\_\_\_

List any second major or degree: \_\_\_\_\_

**Topic of proposed thesis:** \_\_\_\_\_  
 \_\_\_\_\_

**Attach two TYPED paragraphs outlining:**

- The specific courses and/or experiences that led you to this topic.
- An explanation or summarization of your topic.

**Faculty Supervisor Required Information**

Name of Faculty Supervisor (please print):	Department:
UT EID:	Email:
<b>I agree to supervise the above student's thesis and assign a grade for the specified semester.</b>	
<b>Signature:</b>	<b>Date:</b>
<b>Comments:</b>	

**Second Reader Required Information**

Name of Faculty Second Reader (please print):	Department:
UT EID:	Email:
<b>I agree to be the second reader for the above student's thesis and assign a grade for the specified semester.</b>	
<b>Signature:</b>	<b>Date:</b>
<b>Comments:</b>	

**The thesis topic has been approved and this student is cleared for registration in 698A or B as indicated above.**

Graduate Coordinator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_