



GOVSTATE HONORS COLLEGE STUDENT RESEARCH VERIFICATION FORM

Submit this document after your presentation or publication of scholarship.

STUDENTS INFORMATION

Name: _____ Major/Minor: _____
Local Phone No. _____ Email: _____ Class Standing: _____

RESEARCH PROJECT INFORMATION

Paper/Creative Activity Title: _____ Date of Conference/Accept: _____
Name of Conference or Journal Paper was Presented/Published _____ Local/Regional/National: _____ Undergrad/Graduate/Professional: _____
Website of Conference/Publication _____ Sole Authored/ Co-Authored (with other students)/ Co-Authored (with Faculty) _____
Date Submitted: _____ Target Date for Completion: _____

SIGNATURES

Student Submitting Proposal: _____ Date: _____
Supervising Instructor (please read accompanying instructions) _____ Date: _____
Honors College Dean: _____ Date: _____
Approved 1pt _____ Not Approved _____
Approved 2pt _____

INCLUDE WITH THIS FORM: Evidence of Conference/Publication Acceptance (e.g. copy/printout of publication or conference schedule with you as presenter)

Honors College Dean: _____ Date: _____

HONORS COLLEGE USE

Student Notified Proposal Received _____ Date: _____
Honors College Dean: _____ Date: _____
Final Contract Course: _____ Approved _____ Not Approved _____
Date: _____
Student Notified Final Contract Course Approved/Not Approved _____