PROPOSAL FOR HONORS RESEARCH IN PHYSICS

The Physics Department offers an opportunity to pursue Honors in the Physics and Interdisciplinary Physics majors. A student should declare Honors by the end of their junior year; declaring Honors is done in an appointment with a Physics advisor. Students must successfully complete a research project under the supervision of a Physics faculty member by their last term to be considered for an Honors recommendation at graduation.

This form is required of students who are pursuing a thesis project regardless of whether they wish to receive academic credit. The purpose of this form is to review and validate your proposal as completing the requirements for an honors major. If you would like to receive academic credit, please be extremely conscious of the deadline before submitting this so that administrative processes can be completed by university timelines. All proposals are due to 1440 Randall Lab or by email to physics.sso@umich.edu by week two of the term in which you will begin research.

FOR THE STUDENT

Attach to this form a document detailing the following items:

1. Student name
2. Student ID number
3. Student email address
4. Name of research advisor
5. Title of project
6. Research proposal (1 page, typed and double-spaced)
7. Timeline for conducting and completing the research project

Academic credit is available for the research being conducted. Students may take up to two terms of independent study and elect either 2 or 3 credits a term. (Note: If you are being paid for the research being conducted as part of your Honors project, you may not receive academic credit.)

☐ Yes, please issue me an override into PHYSICS 496 for _____ credits in the ________ term.
☐ No, I do not need credit for my Honors research.

If electing credit for more than one term, this proposal form is only required for the first term. For the second term, send an email to SSO requesting an override with your research advisor Cc’d. If you do not currently need credit but would like it in a future term, please resubmit the form indicating “yes” in the options above.

FOR THE PHYSICS FACULTY ADVISOR

By signing below, I agree to work with this student for the entirety of their research project and advise the student on the final written thesis. I will establish a project timeline and regular meetings in consultation with the student to promote progress and completion.

Advisor Name (printed) _____________________________ Signature ____________________________

FOR THE OFFICE

Associate Chair of Undergraduate Studies (signature) _______________________________________

If the Assc. Chair’s signature is unavailable, email approval will be attached.