DEPARTMENT OF PHILOSOPHY
Senior Thesis Approval Form

Student Name____________________________________________________________

Stetson ID # __________________________

Expected date of graduation ___________________________________

If you are a double major:
  Indicate other major _________________________________________________

  Primary department for which you are writing your senior project___________

Thesis Proposal (Attach as separate sheet which must include the following:
(1) Title
(2) Thesis Statement
(3) A two to three page narrative statement of the plan of the argument, which may
  include an outline
(4) Preliminary bibliography

I accept the responsibility of adhering to the departmental requirements and
deadlines for completion of the Senior Research Project.

______________________________________                               ___________
Signature of Student                                                                          Date

I have discussed this Senior Research proposal with the student and agree to serve
as the student’s Senior Research advisor.

______________________________________                                __________
Signature of Faculty Supervisor                                                        Date

______________________________________                                __________
Signature of Department Chair                                                          Date