

THE UNIVERSITY OF TENNESSEE AT CHATTANOOGA
DEPARTMENTAL HONORS THESIS RECOMMENDATION FORM

Name: _____ UTC ID: _____

Date of Graduation: _____ Major: _____

Phone Number: _____ E-mail: _____

Thesis Title: _____

The candidate named above has completed two semesters (4 credit hours) of Departmental Thesis work (course 4995 in the major department), submitted an acceptable thesis to a departmental examining committee, passed an oral examination administered by that committee, and completed any required revisions to the thesis. The candidate is therefore recommended for departmental honors.

Examination Date: _____

Please note: this form carries a recommendation only. Final conferral of Departmental Honors requires the candidate (1) to have a minimum cumulative GPA of 3.2 and a minimum major GPA of 3.2 at the time of graduation, and (2) to submit an acceptably formatted digital copy of the thesis to the Honors College (see the Departmental Honors Manual for full instructions).

	Typed Name	Signature
Thesis Director:	_____	_____
Department Examiner:	_____	_____
Department Examiner: (if more than one)	_____	_____
Department Head:	_____	_____

Department Head or designee: please submit a digital copy of this signed form to the Honors College via email to dhon@utc.edu