Department of Psychology and Neuroscience

Senior Thesis

Approval Form

Use this form for a Senior Thesis that is Í 5 ddfcj YX k]h\ '8]gh]bWh]cb.Î Submit it to Professor Lamoureux, the Director of Undergraduate Studies (jeffrey.lamoureux@bc.edu).

This form is <u>not</u> for students in the Honors Program.

Name of Student:			-
Student's Eagle ID:			_
Student's Major:			_
Month and Year of Thesis Cor	mpletion:		_
Student's School Address:			_
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Student's Home Address:			_
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Thesis Title:			
Printed Name of Advisor:			_
Signature of Advisor:		Date:	
Printed Name of Second Read	der:		_
Signature of Second Reader:		Date:	