

Statement of Intent Form

Undergraduate Thesis
Department of Horticulture
Oregon State University

Statement of Intent

This statement signed by student, supervising research and thesis coordinator commits you to a thesis project. This statement must be submitted prior to beginning your project and before you register for Hort 403 (6-12 credits). Once your project has been approved you may register for these credits any term within the 12 months following approval. Consult with your advisor regarding scheduling to determine best term to add Hort 403. Copies of the completed Statement of Intent will be on file in student's academic file and with project supervisor.

Date: _____

Name: _____
Last First Middle

OSU Student ID Number: _____

Class Standing _____ Area of interest: _____

Name of Supervisor _____
Address of Supervisor _____
Phone No. of Supervisor _____

Title of Project _____

Term(s) you will complete project _____ to _____
beginning date ending date

Term(s) you will register for Hort 403 _____
term(s) year(s)

Number of credits to be earned _____ (6-12 total)

Note: Completed thesis is due on or before the middle of the quarter in which the student will graduate.

Address and phone number where you can be reached while doing your project

Address _____ Phone _____

Signature of Student _____
Signature of Supervisor _____
Signature of Thesis Coordinator _____
Signature of Advisor _____