

**SECOND SEMESTER**  
**◆ SENIOR HONORS THESIS COMPLETION FORM ◆**

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Student's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student's ID#: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Term: Fall\_\_\_ Spring\_\_\_ Summer\_\_\_ Year: \_\_\_\_\_

If the student has *not* signed up for Honors 495, please indicate:

Curricular Designator: (*formerly Subject, e.g., English, Math, History, etc.*): \_\_\_\_\_

Catalog Number: (*formerly Course Number, (e.g. 403, 321, etc.)*): \_\_\_\_\_

**Grade:** \_\_\_\_\_ Name of Thesis Advisor: \_\_\_\_\_

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This is to certify that the above student has successfully completed the work previously outlined in the Senior Honors Thesis Contract signed earlier in the semester. Please briefly describe what the student has accomplished on the project this semester.

Professor's Signature:

\_\_\_\_\_

Thanks for your cooperation.

Please return to:

Dr. Gayle Levy, Honors Program Director  
c/o Sally Mason, Honors Program Secretary  
204 Haag Hall  
masons@umkc.edu  
Telephone 816-235-5854