

BEMIDJI STATE UNIVERSITY
Records & Registration Office
Deputy Hall, Room 101, #12
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Honors Thesis Arranged Course Form

*Obtain the signature of the Thesis Advisor and Honors Director in that order.

Part I (to be completed by the student)

Name: _____ **SSN or BSU ID:** _____
Last First MI

Date: _____ **E-mail:** _____
(Month/Day/Year)

Part II (to be completed by instructor)

Course Subject: HOPR **Course Number:** 4890 – 3 credits **Course Title:** Honors Thesis
4899 – 2 credits (*Fall 04-06 Catalog or later*)

Year: _____ **Term:** _____ (F = Fall, S= Spring, 1 = Summer)

Working Title: _____

Instructor Name: _____ **Instructor ID:** _____

Part III (to be signed by designated persons)

Once required signatures are obtained, this form can be submitted to the Records Office, Deputy Hall 101, #12.

Thesis Advisor: _____ **Date:** _____

Honors Director: _____ **Date:** _____

For Office Use ONLY Course ID: _____ Date Processed: _____