



College of Health Sciences

## Honors Thesis Acceptance Form

As indicated by my College of Health Sciences faculty mentor, I have successfully completed my Honors Thesis in fulfillment of the HMSE 4999 (Senior Project) course.

Thesis Title: \_\_\_\_\_

\_\_\_\_\_

My manuscript has been submitted for publication consideration to the following journal:

Journal Name: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

**OR**

My manuscript has not yet been submitted for publication but will be soon as indicate below.

Journal Name: \_\_\_\_\_

Planned Date of Submission: \_\_\_\_\_

Student Name: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I have examined the final copy of this honors thesis and recommend that it be accepted in partial fulfillment of the requirements for College of Health Sciences Honors Program.

Faculty Member Name: \_\_\_\_\_

Faculty Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_