

NORTHERN MICHIGAN UNIVERSITY
THESIS APPLICATION FORM

DEPARTMENT OF ENGLISH

DATE _____

NAME _____
(Last) (First) (MI)

ADDRESS _____
(Street) (City) (State) (Zip Code)

TELEPHONE _____ NMU IN # _____ E-MAIL ADDRESS _____

Thesis Title: _____

Total Credits: _____

Beginning Semester: _____

Ending Semester: _____

Date Received: _____ Date Approved: _____

Thesis Chair: _____
(Name) (Signature)

Thesis Reader #1: _____
(Name) (Signature)

Upon completion of this form, submit this form with prospectus to the Department Office or directly to Chair of Thesis Application Committee. Once the Department Office receives the original form, EPS paperwork will be processed for payment.