Department of English

Senior Thesis Contractual Confirmation Form

I, ____________________________________________, understand that

(Student’s Name)

I cannot graduate from the English Department at Clark Atlanta University without successful completion of the departmental Senior Thesis requirement. It is my responsibility to choose an advisor whose area of specialty complements my topic and who has agreed to offer me the assistance necessary for completion of the thesis. If my advisor cannot be found, cannot later serve as my advisor, or simply proves ineffectual for the topic under study, I am to report such findings to the Senior Thesis Coordinator who then bears the responsibility of securing another advisor for my thesis. I understand that the topic, time frame, and regular meetings for which my advisor schedules me MUST be honored or my thesis, and consequently, graduation are in jeopardy.

Date:____________________________________________

Topic/Title:____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

I, ____________________________________________, have agreed to serve as

(Senior Thesis Advisor’s Name)

Advisor for the above-titled senior thesis. I understand that I am responsible for the paper’s complete execution, including form, content, and proper research documentation style. If the above-signed student fails to comply with the above-signed advisor’s academic direction, I, the advisor, understand that I have the right – indeed the responsibility – to discontinue serving as thesis advisor and need only make such matter clear to the Coordinator in order to be absolved of the responsibility. A new advisor can and will be chosen to direct the above-titled thesis but ONLY after the initially assigned advisor speaks to the coordinator. Unless such consultation occurs, the understanding is that the above-signed student’s thesis is progressing satisfactorily and that both student and advisor are content with each other.

Date:____________________________________________

Senior Thesis Coordinator Signature/Date ____________________________

Department Chairperson’s Signature/Date ____________________________

This form must be thoroughly completed and submitted to the Senior Thesis Coordinator before student’s work or senior thesis is considered official. A copy will be maintained with the Undergraduate Coordinator, Senior Thesis Advisor, and the Administrative Assistant.

Revised 7/8/09