**COVER SHEET #1**

|  |  |
| --- | --- |
| **Student Name** |  |
| **Academic Major(s)**  |  |
| **Minor(s) and/or Concentration(s)** |  |
| **Student Email** |  |
| **Faculty Mentor** |  |
| **Project Title** |  |

Current Class Standing □ Freshman □ Sophomore □ Junior □ Senior\*

 \*seniors are not eligible unless they are returning for the Fall semester

Do you anticipate needing *on-campus* housing? (no charge) □ Yes □ No

***I understand that Fowler Scholar is a full effort and energy appointment and that participating in summer courses during the program is not permitted. I understand that I am expected to work approximately 25-30 hours/week on this project with hours agreed by my faculty mentor. I will attend relevant colloquia and submit on time final research papers and other project work.***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

(Student Applicant’s Signature) (Date)

***I understand that Fowler Scholar involves a concerted mentoring effort. I will meet with my student researcher at least once a week and be available to them during the majority of the 8-week program period.***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

(Faculty Mentor’s Signature) (Date)

**COVER SHEET #2**

The Fowler Scholar may choose to use their tuition waiver for one of the items below. Select the one you are choosing for summer tuition waiver, indicate the department and course number below, and have the department chair sign the form.

□ Research credit in the major,

□ Honors Program credit,

□ Honors in the Major credit (usually 496). For Honors in the Major, you must submit the appropriate form (ask your department chair).

□ In place of an Intensive Learning May Term course (usually 477). If you plan to use the credit for Intensive Learning May-Term credit, you must apply to the Director of Intensive Learning by April 15 (form available on the IL website).

The signature of the Department Chair below signifies that the student's proposed project meets departmental requirements for the course credit chosen.

Department and Course Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

 (Department Chair's signature) (Date)