Tufts
Center for Interdisciplinary Studies
5 The Green • Eaton Hall, Room 111 • Medford, MA 02155
Phone: 617-627-2955 • Fax: 617-627-3032

CIS Senior Thesis Certification Form

Student Information
Please Print

<table>
<thead>
<tr>
<th>Student Last Name</th>
<th>First Name, MI</th>
<th>Student I.D. Number</th>
</tr>
</thead>
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<thead>
<tr>
<th>Local Street Address</th>
<th>Apartment #</th>
<th>College</th>
<th>Class</th>
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<tr>
<th>City, State</th>
<th>Zip</th>
<th>Home Phone</th>
<th>Email Address</th>
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Student’s Major:
Must be previously declared

Title of Thesis:

Grade for Thesis:

Faculty Advisors for Thesis

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Signature</th>
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<tbody>
<tr>
<td>Primary Advisor:</td>
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2. ____________________________
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3. ____________________________
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Students are required to complete and return this form to the Tufts Center for Interdisciplinary Studies, Eaton Hall, Room 111, Medford Campus, in a timely manner, as addressed in the application guidelines. This form must accompany a copy of the CIS Thesis project. The primary faculty advisor will submit a grade for the thesis. The deadline for grading coincides with grading of other courses as stated in the Tufts University Bulletin. CIS will forward a copy to the Registrar’s Office on the student’s behalf.

Student’s Signature ____________________________ Date _____________

CIS Chair Signature ____________________________ Date _____________

Original – CIS Copy – Registrar Copy – Project Director Copy – Student

10/28/10