



Declaration of Thesis Track

(You must complete and submit this form to the Program Director before registering for MI 797)

Student name: _____ Date: _____

Number of Credits Completed: _____ GPA: _____

Mentor: _____

Proposed Thesis Title: _____

Name _____ Signature _____ Date _____

Mentor: _____

Member 1: _____

Member 2: _____

Program Director: _____

Students please **read** and **sign**:

I, as a graduate student in Microbiology at Wagner College, have accessed and read the guidelines of the Thesis Track in the Microbiology Graduate Program and understand the responsibilities I am undertaking.

X: _____ Date: _____