Note: If completing this form electronically, please copy all committee members when submitting to ashonors@uvm.edu, in lieu of physical signatures.

College of Arts and Sciences

Evaluation of College Honors Thesis Defense/Advisor Permission for Submission to ScholarWorks Form

Sections A through C should be completed by the Thesis Committee Chair and submitted to the Honors Committee via the College of Arts and Sciences Dean's Office (ashonors@uvm.edu) upon completion of the Honors Thesis Defense. Section D should be completed by the Thesis Supervisor(s). Students will submit their final version to ScholarWorks and send a pdf copy to ashonors@uvm.edu.

A. **Information**

Student's Name: _____

Department in which Honors work was performed: _____

Honors Thesis Title: _____

Thesis Committee: (Chair): _____

(Thesis Supervisor): _____

(Third Member): _____

Date of Defense: _____

B. **Qualification for Honors Work**

The decision of the Thesis Committee is that this student: (check one)

o Passed the defense at the Honors level

o Passed the defense at the Readings and Research level

o Failed

C. **Grade and Signatures**

The grade submitted for this work is: _____

Signed: (Chair): _____

(Thesis Supervisor): _____

(Third Member): _____

D. **Submission to ScholarWorks**

The student will be asked to submit their thesis to the ScholarWorks database, a public research archive that is the University of Vermont's preferred vehicle for sharing faculty and student research. We are aware that sometimes the publication of student research may compromise the confidentiality of as-yet unpublished faculty research. In light of this and related considerations, please check the appropriate statement below, providing brief explanations if appropriate, and sign:

_____ The student **has my permission** to post the thesis to ScholarWorks

_____ The student **does not have my permission** to post the thesis to ScholarWorks (please explain)

_____ The student's work should be **embargoed** on ScholarWorks for a certain amount of time (please specify the reason for and the length of the embargo).

Signature of Thesis Supervisor(s):