

**SUMMER RESEARCH PAPER FORM
DEPARTMENT OF CLASSICAL STUDIES**

SUMMER TERM: MAY 1 – AUGUST 31 (GRADES DUE AUGUST 31)

Course: (Please check one of the boxes): Latin _____ Greek _____ Classics _____
(admin assistant to insert Course Number)

RESEARCH PAPER TITLE (LONG VERSION)

(REQUIRED)

TITLE FOR ACADEMIC RECORD (SHORT VERSION – MAX. 30 CHARACTERS)

Student Name and ID Number: _____

Supervisor: _____

SUPERVISOR'S DEADLINE: _____

(PLEASE DISCUSS WITH STUDENT YOUR DEADLINE FOR SUBMISSION OF RESEARCH PAPER)

Research Texts/Sources:

Schedule of work:

**PLEASE SUBMIT THIS FORM (SIGNED) AND A COPY OF THE ABSTRACT TO THE ADMIN ASSISTANT BY
APRIL 1st**

Signatures:	_____	_____
	Student	Date
	_____	_____
	Supervisor	Date
	_____	_____
	Graduate Chair	Date