**Capstone Experience Registration Form**

Health Science Scholars Honors Program

College of Natural Sciences

The University of Texas at Austin

Dear Capstone Experience supervisor:

Students in Health Science Scholars complete a thesis on a research question that emerges from an experience or project that will take up no fewer than 200 hours. This experience typically begins during their third year and frequently continues into their last semester, when they write their thesis.

The purpose of this form is to help those of us who teach a sequence of Capstone-related courses know that a student has found an appropriate experience as well as a faculty or community member who can either direct their work or confirm that the student has committed to the described involvement.

Their experience can involve either supervised research in or outside their major, or a form of on-site learning that relates to health care, community service, or both. Examples of the latter include:

* A practicum at a medical clinic
* Volunteering with a community organization
* A medical mission abroad
* Tutoring at a low-SES school

If you’re a faculty member, signing this form does **not** obligate you to serve as their thesis mentor. Please let me know if you have any questions, and thank you very much for your time.



Madison Searle | Director, CNS Honors & Scholarships | (512) 232-2772 | madisonsearle@austin.utexas.edu

*Students: This is due by October 31, 2017.*

1. *Provide information in each shaded area except for the date beneath your supervisor’s signature. The areas will expand as you write.*
2. *Send digital or physical form to your supervisor. A digital signature is acceptable.*
3. *Submit completed form at our NSC 109 Canvas site or hand-deliver to PAI 5.37 or 5.48.*

**Student’s name**:

Very briefly describe your project:

**Supervisor’s name**:

**Affiliation** (ex: Professor of Chemistry, UT-Austin; Dir. Of Breakthrough Austin):

**Email address:**

*The student named above has discussed this project with me and has committed to the required time investment.*

 Supervisor’s signature:

 Date: