University of Georgia  
Department of Genetics  

Application for GENE 4990 Thesis Course Approval  

Deadline: Submit this form to Hayley Felts, B107 Davison Life Sciences by the first day of classes in the semester for which you wish to register.  

GENE 4990(H) is the final course in a series of at least two semesters of research supervised by the same faculty member. In this course, students will write a thesis that describes their inquiry into a scientific problem. The thesis is written in close collaboration with the faculty thesis director and must be approved by that faculty member and an independent reader according to departmental guidelines.  

Students who complete the thesis sequence of GENE 4960, GENE 4970 and GENE 4990 (or the Honors equivalents) under the supervision of the same faculty supervisor, and submit a thesis, will satisfy the Genetics major lab requirement. Students registering for GENE 4990H should also complete the CURO Thesis Course Application.  

STUDENT INFORMATION  

Student Name: ___________________________________________  81#: _______________________  

Semester of Thesis Course: ___________________ Major(s): _______________________________________  

UGA email address: ____________________________________________  

List the GENE research courses, and the semesters of completion, that you have satisfactorily completed under this faculty member: ________________________________________________________________  

The student must submit a written thesis to fulfill the requirements for this course. The student should submit a PDF of the thesis to Hayley Felts by 3:00 p.m. on the last day of finals to satisfactorily complete the Genetics major lab requirement.  

Thesis format: The thesis should be prepared using the guidelines described for the format of CURO theses (see https://curo.uga.edu/students/thesis_course.html).  

FACULTY THESIS DIRECTOR INFORMATION  

Faculty Thesis Director Name: ___________________________  Telephone: ______________  

Department: _____________________________  Email address: _____________________________  

Has this student satisfactorily completed GENE 4960 and 4970 under your supervision? Yes _______ No _______  

READER INFORMATION  

The thesis requires a Reader who serves as an external evaluator and must approve the final draft of the thesis. After reviewing the final draft, the Reader should meet with the student to provide feedback. The Department of Genetics requires that Readers be chosen from a Ph.D.-level scientist in a lab other than the one in which the research was conducted. If the research was conducted in the lab of a non-Genetics faculty, the Reader must be a Genetics faculty member (regular or adjunct).  

Name of Thesis Reader: ____________________________________________  

Position at University: ____________________________________________  

Revised 3/2017
Thesis Title and Abstract (Describe the research you have completed under this faculty sponsor)

**Timeline:** The Student, Faculty Thesis Director and Reader should agree on a timetable to ensure timely completion of the thesis. These dates, with the exception of the last one, can be adjusted by mutual agreement of the Student, Faculty Thesis Director, and Reader. Students should not change these dates without prior approval of the Faculty Thesis Director.

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<tr>
<th>Task</th>
<th>Date (MM/DD/YY)</th>
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<tbody>
<tr>
<td>First draft due to Faculty Thesis Director</td>
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<tr>
<td>Final draft due to Faculty Thesis Director</td>
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<tr>
<td>Final draft due to Reader</td>
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<td>Final Review Meeting with Reader</td>
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<tr>
<td>Final Meeting with Faculty Thesis Director</td>
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<tr>
<td>Final Submission to Genetics office *</td>
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*The final draft of the thesis must be submitted by 5:00 p.m. on the last day of finals. Both the Reader and the Faculty Thesis Director must approve and sign the final draft of the thesis before it can be submitted to the Department.*

Student’s Signature: _______________________________________________ Date: ________________

Reader’s Signature: ___________________________ Date: ________________

Faculty Thesis Director’s Signature: _________________________________ Date: ________________

Undergraduate Coordinator’s Signature: ______________________________ Date: ________________