



**THE OHIO STATE
UNIVERSITY**

COLLEGE OF PHARMACY

BSPS Honors Project Initiation Form

An Honors BSPS student will develop academic and/or personal character skills through participation in academically-related experiences that contribute to both personal development and to some aspect of the public good, such as production of new scientific/clinical knowledge, participation in community service, involved in public policy, or immersion in a different cultural environment.

Student Name.#: _____

Student ID: _____

Project Title: _____

Name of Faculty Mentor: _____

Faculty Mentor title: _____

Faculty Mentor College/Department: _____

Faculty Mentor Contact email/phone: _____

Please attach a one paragraph description of your project, and list the learning goals you hope to accomplish.

I agree to and understand the following:

- I will be responsible for coordinating regular communication with my Faculty Mentor in order to regularly evaluate the progress of my Honors Project.
- I will communicate with my academic advisor if the nature of my Honors Project should change, or if any other notable issues/challenges should arise.
- I will register for 2-3 credit hours of PHR 4997 or 4998 with my Faculty Mentor for at least two semesters (total 4-6 credit hours).
- I will produce a written document/poster summarizing my Honors Project, and will present this information at the Denman Undergraduate Research Forum, Pharmacy Research Day, or another approved program.
- I am responsible for completing the *BSPS Honors Project Completion Form* and submitting it to my academic advisor within two weeks of presenting my project.

(Student Signature)

(Date)

Please return this form to your assigned academic advisor