TLSAMP Project Form for Research Assistants

Name: _____ T#: _____

Major: _____

Classification: _____

Faculty Advisor: _____

Project Title: _____

Start Date: _____ End Date: _____

Project Description:

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Faculty Advisor Signature: _____ Date: _____

Student Signature: _____ Date: _____

Note: All TLSAMP Research Assistants are required to present at the TLSAMP Research Conference.