



# Integrative Biology Honors Thesis Approval Form

Name: \_\_\_\_\_ SID: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

IB Curriculum: Track 1 \_\_\_\_\_ Track 2 \_\_\_\_\_

Lab P.I.: \_\_\_\_\_ Sponsor: \_\_\_\_\_

Thesis Title:

\_\_\_\_\_  
\_\_\_\_\_

Thesis Abstract (may be attached on a separate page):

Presentation Event: CalDay: \_\_\_\_\_ Other\*: \_\_\_\_\_  
\*Needs advisor approval

**\*\*\*\*\* TO BE COMPLETED BY FACULTY \*\*\*\*\***

**By signing below, you are indicating that this student has fulfilled the honors presentation requirement and has completed and submitted a thesis of honors quality.**

**Lab P.I. Name (Print):**

**Lab P.I. Signature:**

\_\_\_\_\_

\_\_\_\_\_

**Sponsor Name (Print):**

**Sponsor Signature:**

\_\_\_\_\_

\_\_\_\_\_

**\*\*IB USSO USE ONLY\*\***

**UCB GPA:**

**IB GPA:**

**IB Upper Division GPA:**