

## MATESL Declaration of Thesis Option

University of Illinois at Urbana-Champaign

*This agreement represents an understanding between the advisor and the student:*

Student's Name: \_\_\_\_\_ UIN: \_\_\_\_\_

*The **student** agrees to consult regularly with the advisor about course selection, research subject, thesis preparation, and any other matters related to the student's course of study.*

Student's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Advisor's Name: \_\_\_\_\_

*The **advisor** agrees to provide timely feedback on the student's research and on their progress towards meeting program requirements.*

*A student wanting to change to or from the MA thesis option may do so by consulting with their advisor (re)submitting this form to the Graduate Student Services office.*

Signature: \_\_\_\_\_ Date \_\_\_\_\_