## **Honors Experiential Learning Proposal**

\* Read before proceeding: The proposed project must be supervised by a Tech faculty member. See your department's Honors Faculty Liaison or Dr. Barnes at <a href="mailto:ritabarnes@tntech.edu">ritabarnes@tntech.edu</a> if you need help finding an appropriate professor. This will take time, and it is the student's responsibility ask for assistance at the beginning of the planning process.

Deadline: April 12, 2022

Name		T#	e-mail	
Major	Name of faculty n	nember who will as	ssess your work*	
Course # used by	your dept. for this experie	ence (e.g., for inter	nships or research), if any	T
I. Use this form	m to propose credit for H	Ionors experienc	e associated with (chec	k ALL that apply):
Internship _	Faculty-mentored researc	chCivic engag	gement project related to	your careerStudy abroad
Service leaders	ship related to your field of	study REU	Self-designed project	Clinical/shadowing
experience Ir	ntensive language study	Teaching experi	enceOther (describe	concisely):
	s you work on the proposa			ished the individual item to verify that
	on (150-300 words) that in the doing, and other details			nected to the project, clear explanation nors-level work.
	ow will you evaluate and gravith you) Please include sp			ets, documentation, requirements for description.
	ation of acceptance to/pe er formal evidence of the e			with an organization, terms of an an to participate
	you would normally enroll			Co-op, Internship, Research per and name, as well as faculty
E. After obtain	ning faculty and chair ap n.edu.	proval (below), s	end the completed form	<b>1 to</b> Dr. Barnes at
III. Complete or	nly the section relevant to	o your proposal:		
Eligibility: Must area related to you	ur professional goals. Inter o security confidentiality ag	ogram or placement ogram or placement	nt that requires an advance clerical components are	Ouration:  ced level of judgment and skill in an not eligible. If responsibilities are complexity and have supervising
The internship	is highly competitive and i	s awarded based o	n outstanding qualificatio	ns; see documentation.
The internship	requires an advanced level	of judgment and s	skill related to my career;	see proposal description.

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RESEARCH: Duration				
Eligibility: REU, NIH, ORNL, or other com CISE/URECA in which the student's respons				
I have been accepted by a competitive resear funding agency, institution sponsoring the rese occur, name and email for the PI.				
I am involved in a sustained research project provide details in your project description.	•	·		
Other: In your project description, include	rationale indicating why your work warrants h	nonors-level credit.		
CIVIC ENGAGEMENT/SERVICE LEAD				
<b>Eligibility:</b> Innovative leadership in service reposition or through need-based, proactive pro	1 0 1	e e e e e e e e e e e e e e e e e e e		
I am initiating an effort to meet a document civic engagement projectI am under should specify the parameters and academic did a team. (Your project description should detail	rtaking research as a significant part of my pro iscipline-appropriate methodology of your res	oject. (Your project description		
STUDY ABROAD: Name of univ. and location	ion:	_ Duration of study:		
<b>Eligibility:</b> Semester- or year-long programs; honors-level academic requirements. Service a tours are not eligible.	abroad must meet requirements for Service Le	eadership (above). Standard study		
	versity abroad in an advanced topic in my maj pating in the State Department's Critical Langu rsion in a language other than English or my r	ages ProgramI will be		
IV. Student confirmation of proposal: that I intend to undertake. Changes in the probelow, I agree to fulfill the proposal according		ries below. By signing my full name		
Student Signature:	Date			
V. APPROVALS:				
<b>A.</b> Faculty supervisor's confirmation: By s Experiential Learning option.	signing my full name and title below, I agree to	o supervise this Honors		
I have specified the criteria for grading in the plan. At the end of the semester, I will send co				
Faculty Signature: Date				
B. Dept Chair Signature:	Printed Name:	Date		
FOR HONORS OFFICE USE ONLY: Honors Dir	rector Signature	Date		
Course number CRN		Cr		

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