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**CHEMISTRY DEPARTMENT**  
**REQUEST FOR CAPSTONE RESEARCH ADVISOR**

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The capstone project should reflect student's ability to integrate chemistry knowledge gained through the coursework, to learn outside the classroom, and to demonstrate independence. An intellectual contribution within the field of chemistry is expected.

Student Name: \_\_\_\_\_ Email: \_\_\_\_\_

Chemistry Courses Completed:    \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_  
   \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_  
   \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_

I have read Capstone Experience Guidelines. (See the link on the capstone webpage <http://www.marshall.edu/chemistry/capstone.asp>). I have discussed the research projects that are being carried out in the laboratories of three undersigned chemistry faculty members.

**Faculty Signature**

**Date**


My preferences for research advisor are listed below in order of descending preference.

1.    \_\_\_\_\_
2.    \_\_\_\_\_
3.    \_\_\_\_\_

Email and phone number of advisor choice: \_\_\_\_\_

Note: If the proposed research advisor is not in the Department of Chemistry, a short description of the proposed project signed by the advisor is required as part of this request.

This form must be returned to the Department Chairman **no later than 4:00 p.m.** on the day **prior** to the schedule adjustment period at the beginning of the semester in which you sign up for CHM 490.