Attachment 1

HAMLINE UNIVERSITY
THE CREATIVE WRITING PROGRAMS
INTENT TO REGISTER FOR THESIS I

Return completed form to the CWP office:

- **by email** to cwp@hamline.edu
- **by mail** to Hamline University, The Creative Writing Programs, MS-A1730, 1536 Hewitt Ave, St. Paul MN 55104
- **in person** to the CWP office at 1500 Englewood Avenue

Contact CWP at 651-523-2047 with questions.

Please type or print

Hamline ID # _____ **Email:** _____

Name: _____
Last *First* *Middle*

Phone: (_____) _____

I intend to register for Thesis I in Fall of _____
Year

1. Please circle **THREE** faculty members with whom you would most like to work. These should be faculty in your genre or faculty you believe would be helpful primary advisors and outside readers for your thesis. The full-time faculty will be assigned first (before adjunct faculty) as primary advisors and outside readers. Please do not indicate any preference.

John Brandon Sheila O'Connor Richard Pelster-Wiebe

Angela Pelster-Wiebe Katrina Vandenberg

2. Please circle THREE additional Creative Writing Programs instructors as backup primary advisors or outside readers if the above faculty are not available. Please do not indicate any preference.

Swati Avasthi	Mary Logue	Anna Meek	Sun Yung Shin
Emma Bull	Peter Geye	David Oppegaard	Carolyn Holbrook
Laura Flynn	Gretchen Marquette	Juliet Patterson	

In the space below, please indicate the primary genre(s) of your thesis project. Please also staple a one-page summary of your intended project to this form. This doesn't have to be a complete outline, rather a general idea of your vision for thesis to help pair you with the most suitable faculty members.

I understand that the CWP office will do everything within reason to arrange for me to work with the advisors and outside readers I've indicated above, but that due to university requirements of faculty load and the availability of individual instructors, it may not be possible. By signing this form, I agree to work with the primary thesis advisor and outside reader assigned to me. I understand that this form serves as an official intent to register for Thesis I and that I am expected to register in the term indicated above. I acknowledge that changes in my intended registration term and/or in my thesis project must be communicated to the CWP office immediately.

Student signature (required): _____ Date: _____