**EHS SENIOR GRADUATION PROJECT PROPOSAL**

Students will need to get a signed project approval by their parent, Mentor, Senior Graduation Project Graduation Coordinator and/or Mr. Knott

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Parent Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parent E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parent Work/Cell #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Title of Project**:

**Learning Path:** Service-Learning/Community Service OR Experiential (circle one)

**A. ABSTRACT**

**B. LEARNING PATH/STEPS**

**C. PROJECT STEPS**

**D. DOCUMENTATION**

**E. PROJECT JUSTIFICATION**

**F. ACADEMIC HONESTY** I know it is illegal to copy someone else's words without giving them credit. It is also illegal to fabricate information and/or have someone else write any part of my paper or do my work on the project. Any of these things constitutes plagiarism and violates the school's Academic Honesty Policy. To do so will result in a failing grade on the paper, the project, or both, and if guilty, I will not graduate, or take part in the ceremony in June.

**G. COMPLETION DATES**

**December or April Presentation (circle one)**

**COSTS**

**Commitment/Authenticity Oath:**

“I understand all of my responsibilities in completing this project, including meeting all deadlines, handing in the time log, written report, and completing the oral presentation. I also understand that all work on my Graduation Project must be my original work. I will properly cite all sources used in accordance with Evansville Community School District policy. Any plagiarism will invalidate my project and will jeopardize my graduation.”

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

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

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

SGP Coordinator’s (Mrs. Buttchen) Signature:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_