Oberlin College Library Scholar Study Application

Semester of Preference: Fall_____ Spring_____

Needed for Winter Term: Yes_____ No_____

Name:_____________________________ Phone#_____________ E-Mail_________________

OCMR: __________ Class of_____

Major/department or program and name of advisor, sponsor, or supervisor:
_____________________________________________________________________________

Nature of Project (doctoral dissertation, honors paper, other (specify)):______________________________
______________________________________________________________________________________
______________________________________________________________________________________

Describe character of research project which makes assignment of study necessary:___________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

Students must have written approval of advisor or department head. Please have your advisor or department head read and sign:

________ I certify the applicant is in our honors program and is approved for assignment to a scholar study.

Name (please print):________________________ Signature: ____________________ Date:_________

Applicant must read and sign the following:

"I have read the scholar study rules found on the reverse side of this application, and agree to abide by these rules. I understand that violation of these rules could mean forfeiture of the scholar study."

Signed: ________________________________ Date:_____________

Please note: There are a limited number of available scholar studies--assignments are made on a first-come basis. Prompt submission of applications to the Library Administrative Office, prior to the end of spring semester, is encouraged. When scholar studies are all assigned, remaining applications will be filed chronologically according to date application was submitted, and vacancies, if any, will be assigned to earliest applicants on this waiting list.

-------------------------------------------------------------------------------------------------

Office Use Only:

Date Received:_____________ Term Assigned:_____________ Study Assigned:_____________