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**PROJECT TITLE**

by

**NAME**

John Carroll University

Senior Honors Project

**Term, Year**

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Name of Student Signature of Student Date

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Name of Primary Advisor Signature of Primary Advisor Date

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Name of Honors Program Reader Signature of Honors Program Reader Date

This Senior Honors Project has been approved and accepted by the John Carroll University Honors Program,

 in partial fulfillment of the requirements for an Honors Diploma.

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Dr. Angela Jones, Honors Program Director Date

**John Carroll University**

**Senior Honors Project**

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Name of Student Student Signature Date

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